

State: District of Columbia **Filing Company:** Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

Product Name: 2015 DC Small Group

Project Name/Number: /

Filing at a Glance

Company: Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

Product Name: 2015 DC Small Group

State: District of Columbia

TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)

Sub-TOI: HOrg02G.004F Small Group Only - HMO

Filing Type: Rate

Date Submitted: 06/13/2014

SERFF Tr Num: KPMA-129593007

SERFF Status: Assigned

State Tr Num:

State Status:

Co Tr Num:

Implementation: 01/01/2015

Date Requested:

Author(s): Lynn Robinson, Danielle Meadows, Brent Plemons, Tony Weatherspoon, Melanie Hiller, Nikki Bridgeforth

Reviewer(s): Darniece Shirley (primary), Alula Selassie, John Morgan, Beichen Li

Disposition Date:

Disposition Status:

Implementation Date:

State Filing Description:

State: District of Columbia **Filing Company:** Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

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Product Name: 2015 DC Small Group

Project Name/Number: /

General Information

Project Name: Status of Filing in Domicile:
Project Number: Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Group
Submission Type: New Submission Group Market Size: Small
Group Market Type: Employer Overall Rate Impact: 8.4%
Filing Status Changed: 06/16/2014
State Status Changed: Deemer Date:
Created By: Brent Plemons Submitted By: Brent Plemons
Corresponding Filing Tracking Number:

PPACA: Not PPACA-Related

PPACA Notes: null

Include Exchange Intentions: No

Filing Description:

This is the 2015 Small Group rate filing for plans offered on exchange.

Company and Contact

Filing Contact Information

Catherine Reifert, Manager catherine.l.reifert@kp.org
2101 E. Jefferson 301-816-7346 [Phone]
Rockville, MD 20852 301-816-7346 [FAX]

Filing Company Information

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.	CoCode: 95639	State of Domicile: Maryland
2101 E Jefferson St.	Group Code:	Company Type: Health
Rockville, MD 20852	Group Name:	Maintenance Organization
(301) 816-6867 ext. [Phone]	FEIN Number: 52-0954463	State ID Number:

Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:

State:	District of Columbia	Filing Company:	Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
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Product Name:	2015 DC Small Group		
Project Name/Number:	/		

Rate Information

Rate data applies to filing.

Filing Method:	Electronic
Rate Change Type:	Increase
Overall Percentage of Last Rate Revision:	%
Effective Date of Last Rate Revision:	01/01/2014
Filing Method of Last Filing:	Electronic

Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.	Increase	8.400%	6.800%	\$1,020,296	1,860	\$14,899,850	12.400%	-2.000%

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Product Name: 2015 DC Small Group

Project Name/Number: /

Rate Review Detail

COMPANY:

Company Name: Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

HHS Issuer Id: 94506

PRODUCTS:

Product Name	HIOS Product ID	HIOS Submission ID	Number of Covered Lives
DC Small Group	94506DC035, 94506DC036		3105

Trend Factors:

FORMS:

New Policy Forms:

DC-SG-HMO-FACE(01-14)HIX, DC-SG-POS-FACE(01-14)HIX, EOC-COVER (1-05), DC-SG-WRAP(01-14)HIX, KFHP-EOC COVER (01/10)DC, DCLG-ALL-TOC(1-05), DC-SG-SEC1(01-15)HIX, DC-SG-SEC2(01-15)HIX, DC-SG-SEC3(01-15)HIX, DC-SG-SEC4(01-14)HIX, DC-SG-SEC5(01-14)HIX, DC-SG-SEC6(01-15)HIX, DC-SG-SEC7(01-14)HIX, DC-SG-APPX-DEF(01-15)HIX, DC-SG-PLATINUM-0-20-DENTAL-HMO-COST(01-15)HIX, DC-SG-GOLD-0-20-DENTAL-HMO-COST(01-15)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-COST(01-15)HIX, DC-SG-GOLD-500-20-DENTAL-DHMO-COST(01-15)HIX, DC-SG-GOLD-1000-30-DENTALDHMO-COST(01-15)HIX, DC-SG-SILVER-1250-35-DENTALDHMO-COST(01-15)HIX, DC-SG-SILVER-2000-35-DENTALDHMO-COST(01-15)HIX, DC-SG-BRONZE-4500-50-DENTALDHMO-COST(01-15)HIX, DC-SG-GOLD-1250-10-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-GOLD-1250-0%-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-SILVER-1500-30-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-SILVER-1500-30-10%-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-BRONZE-3500-20%-HSADENTAL-HDHP-COST(01-15), DC-SG-BRONZE-4500-20-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-BRONZE-2750-40-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-BRONZE-4500-50-POSDENTAL-COST(01-15)HIX, DC-SG-GOLD-1000-30-POSDENTAL-COST(01-15)HIX, DC-SG-SILVER-2000-35-POSDENTAL-COST(01-15)HIX, DC-SG-PLATINUM-0-20-DENTALHMO-RX(01-15)HIX, DC-SG-GOLD-0-20-DENTAL-HMORX(01-15)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-RX(01-15)HIX, DC-SG-GOLD-500-20-DENTALDHMO-RX(01-15)HIX, DC-SG-GOLD-1000-30-DENTALDHMO-RX(01-15)HIX, DC-SG-SILVER-1250-35-DENTALDHMO-RX(01-15)HIX, DC-SG-SILVER-2000-35-DENTALDHMO-RX(01-15)HIX, DC-SG-BRONZE-4500-50-DENTALDHMO-RX(01-15)HIX, DC-SG-GOLD-1250-10-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-GOLD-1250-0%-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-SILVER-1500-30-10%-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-SILVER-1500-30-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-2750-40-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-3500-20%-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-4500-20-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-4500-50-POS-DENTAL-RX(01-15)HIX, DC-SG-GOLD-1000-30-POS-DENTAL-RX(01-15)HIX, DC-SG-SILVER-2000-35-POS-DENTAL-RX(01-15), DC-SG-DENTAL-ADULT(01-14)HIX, DC-SG-PED-

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Product Name:	2015 DC Small Group		
Project Name/Number:	/ DENTAL(01-15)HIX, DC-POS-AMEND(01-14)HIX		

Affected Forms:

Other Affected Forms:

REQUESTED RATE CHANGE INFORMATION:

Change Period:	Quarterly
Member Months:	22,223
Benefit Change:	Increase
Percent Change Requested:	Min: -2.0 Max: 12.4 Avg: 6.8

PRIOR RATE:

Total Earned Premium:	14,899,850.00
Total Incurred Claims:	11,994,380.00
Annual \$:	Min: 147.56 Max: 892.97 Avg: 670.46

REQUESTED RATE:

Projected Earned Premium:	15,920,146.00
Projected Incurred Claims:	12,826,862.00
Annual \$:	Min: 145.66 Max: 974.82 Avg: 716.37

SERFF Tracking #:	KPMA-129593007	State Tracking #:	Company Tracking #:
State:	District of Columbia	Filing Company:	Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
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Product Name:	2015 DC Small Group		
Project Name/Number:	/		

Rate/Rule Schedule

SERFF Tracking #:

KPMA-129593007

State Tracking #:

Company Tracking #:

State:

District of Columbia

Filing Company:

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

TOI/Sub-TOI:

HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

Product Name:

2015 DC Small Group

Project Name/Number:

/

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		2015 DC Small Group Exchange Rate Sheets	DC-SG-HMO-FACE(01-14)HIX, DC-SG-POS-FACE(01-14)HIX, EOC-COVER (1-05), DC-SG-WRAP(01-14)HIX, KFHP-EOC COVER (01/10)DC, DCLG-ALL-TOC(1-05), DC-SG-SEC1(01-15)HIX, DC-SG-SEC2(01-15)HIX, DC-SG-SEC3(01-15)HIX, DC-SG-SEC4(01-14)HIX, DC-SG-SEC5(01-14)HIX, DC-SG-SEC6(01-15)HIX, DC-SG-SEC7(01-14)HIX, DC-SG-APPX-DEF(01-15)HIX, DC-SG-PLATINUM-0-20-DENTAL-HMO-COST(01-15)HIX, DC-SG-GOLD-0-20-DENTAL-HMO-COST(01-15)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-COST(01-15)HIX, DC-SG-GOLD-500-20-DENTAL-DHMO-COST(01-15)HIX, DC-SG-GOLD-1000-30-DENTALDHMO-COST(01-15)HIX, DC-SG-SILVER-1250-35-DENTALDHMO-COST(01-15)HIX, DC-SG-SILVER-2000-35-DENTALDHMO-COST(01-15)HIX, DC-SG-BRONZE-4500-50-DENTALDHMO-COST(01-15)HIX, DC-SG-GOLD-1250-10-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-GOLD-1250-0%-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-SILVER-1500-30-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-SILVER-1500-30-10%-HSADENTAL-HDHP-	Revised	Previous State Filing Number: KPMA-129054921 Percent Rate Change Request: 8.4	2015 DC Small Group Exchange Rate Sheets.pdf,

SERFF Tracking #:

KPMA-129593007

State Tracking #:

Company Tracking #:

State:

District of Columbia

Filing Company:

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

TOI/Sub-TOI:

HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

Product Name:

2015 DC Small Group

Project Name/Number:

/

			COST(01-15)HIX, DC-SG-BRONZE-3500-20%-HSADENTAL-HDHP-COST(01-15), DC-SG-BRONZE-4500-20-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-BRONZE-2750-40-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-BRONZE-4500-50-POSDENTAL-COST(01-15)HIX, DC-SG-GOLD-1000-30-POSDENTAL-COST(01-15)HIX, DC-SG-SILVER-2000-35-POSDENTAL-COST(01-15)HIX, DC-SG-PLATINUM-0-20-DENTALHMO-RX(01-15)HIX, DC-SG-GOLD-0-20-DENTAL-HMORX(01-15)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-RX(01-15)HIX, DC-SG-GOLD-500-20-DENTALDHMO-RX(01-15)HIX, DC-SG-GOLD-1000-30-DENTALDHMO-RX(01-15)HIX, DC-SG-SILVER-1250-35-DENTALDHMO-RX(01-15)HIX, DC-SG-SILVER-2000-35-DENTALDHMO-RX(01-15)HIX, DC-SG-BRONZE-4500-50-DENTALDHMO-RX(01-15)HIX, DC-SG-GOLD-1250-10-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-GOLD-1250-0%-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-SILVER-1500-30-10%-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-SILVER-1500-30-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-2750-40-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-3500-20%-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-			
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Product Name:	2015 DC Small Group		
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			BRONZE-4500-20-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-4500-50-POS-DENTAL-RX(01-15)HIX, DC-SG-GOLD-1000-30-POS-DENTAL-RX(01-15)HIX, DC-SG-SILVER-2000-35-POS-DENTAL-RX(01-15), DC-SG-DENTAL-ADULT(01-14)HIX, DC-SG-PED-DENTAL(01-15)HIX, DC-POS-AMEND(01-14)HIX			
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Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective January 1, 2014
District of Columbia Small Group Exchange
Appendix I-A

[illegible]

Rates effective January 1, 2014
District of Columbia Small Group Exchange
Appendix I-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$284.87	\$271.46	\$264.75	\$258.25	\$235.97	\$236.29
21	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
22	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
23	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
24	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
25	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
26	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
27	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
28	\$324.07	\$308.82	\$301.18	\$293.79	\$268.44	\$268.81
29	\$331.04	\$315.46	\$307.66	\$300.11	\$274.21	\$274.59
30	\$339.31	\$323.35	\$315.35	\$307.61	\$281.07	\$281.46
31	\$348.02	\$331.65	\$323.44	\$315.51	\$288.28	\$288.68
32	\$355.86	\$339.12	\$330.73	\$322.62	\$294.78	\$295.19
33	\$364.14	\$347.01	\$338.42	\$330.12	\$301.63	\$302.05
34	\$372.85	\$355.31	\$346.52	\$338.02	\$308.85	\$309.28
35	\$381.56	\$363.61	\$354.61	\$345.92	\$316.06	\$316.50
36	\$390.28	\$371.91	\$362.71	\$353.81	\$323.28	\$323.73
37	\$398.99	\$380.21	\$370.81	\$361.71	\$330.50	\$330.96
38	\$403.78	\$384.78	\$375.26	\$366.06	\$334.47	\$334.93
39	\$408.57	\$389.35	\$379.71	\$370.40	\$338.43	\$338.90
40	\$424.69	\$404.70	\$394.69	\$385.01	\$351.78	\$352.27
41	\$441.24	\$420.48	\$410.07	\$400.02	\$365.49	\$366.00
42	\$458.66	\$437.08	\$426.27	\$415.81	\$379.93	\$380.45
43	\$476.52	\$454.10	\$442.86	\$432.00	\$394.72	\$395.27
44	\$495.25	\$471.95	\$460.27	\$448.98	\$410.23	\$410.80
45	\$514.41	\$490.21	\$478.08	\$466.36	\$426.11	\$426.70
46	\$534.45	\$509.30	\$496.70	\$484.52	\$442.71	\$443.32
47	\$555.36	\$529.23	\$516.13	\$503.47	\$460.03	\$460.66
48	\$577.14	\$549.98	\$536.37	\$523.22	\$478.07	\$478.73
49	\$599.79	\$571.57	\$557.42	\$543.75	\$496.83	\$497.52
50	\$623.31	\$593.98	\$579.28	\$565.08	\$516.31	\$517.03
51	\$647.70	\$617.22	\$601.95	\$587.19	\$536.52	\$537.26
52	\$672.96	\$641.30	\$625.43	\$610.09	\$557.44	\$558.22
53	\$699.10	\$666.20	\$649.72	\$633.79	\$579.09	\$579.90
54	\$726.54	\$692.35	\$675.22	\$658.66	\$601.82	\$602.66
55	\$754.85	\$719.33	\$701.54	\$684.33	\$625.27	\$626.14
56	\$784.47	\$747.56	\$729.06	\$711.18	\$649.81	\$650.71
57	\$814.96	\$776.62	\$757.40	\$738.82	\$675.06	\$676.00
58	\$846.76	\$806.92	\$786.95	\$767.65	\$701.40	\$702.38
59	\$879.86	\$838.46	\$817.72	\$797.66	\$728.82	\$729.84
60	\$914.27	\$871.25	\$849.70	\$828.86	\$757.33	\$758.38
61	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01
62	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01
63	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01
64+	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective April 1, 2014
District of Columbia Small Group Exchange
Appendix B-A

	1	2	3	4	5	6	7	9	10	11	12	14	15	16	17	18	19	20
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	P DC Platinum 4500/10000/Pol Dental	P DC Platinum 4500/10000/Pol Dental	KP DC Gold 1500/3000/Pol Dental	DC Gold 1500/3000/Pol Dental	P DC Gold 1500/3000/Pol Dental	P DC Gold 1500/3000/Pol Dental	KP DC Gold 1500/3000/Pol Dental	P DC Silver 1500/3000/Pol Dental	DC Silver 1500/3000/Pol Dental	P DC Silver 1500/3000/Pol Dental	KP DC Silver 1500/3000/Pol Dental	DC Bronze 4500/10000/Pol Dental	DC Bronze 4500/10000/Pol Dental	P DC Bronze 4500/10000/Pol Dental	P DC Bronze 4500/10000/Pol Dental	P DC Bronze 4500/10000/Pol Dental	KP DC Silver 2000/4000/Pol Dental	KP DC Gold 1000/2000/Pol Dental
20 and Under	\$273.64	\$260.77	\$254.32	\$248.08	\$226.99	\$227.44	\$224.95	\$192.47	\$191.13	\$197.66	\$197.66	\$157.33	\$157.33	\$162.09	\$162.09	\$162.09	\$173.19	\$262.68
21	\$304.19	\$289.88	\$282.70	\$275.77	\$251.97	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$172.73	\$180.19	\$174.89	\$163.32	\$244.33	\$292.00
22	\$304.19	\$289.88	\$282.70	\$275.77	\$251.97	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$172.73	\$180.19	\$174.89	\$163.32	\$244.33	\$292.00
23	\$304.19	\$289.88	\$282.70	\$275.77	\$251.97	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$172.73	\$180.19	\$174.89	\$163.32	\$244.33	\$292.00
24	\$304.19	\$289.88	\$282.70	\$275.77	\$251.97	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$172.73	\$180.19	\$174.89	\$163.32	\$244.33	\$292.00
25	\$304.19	\$289.88	\$282.70	\$275.77	\$251.97	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$172.73	\$180.19	\$174.89	\$163.32	\$244.33	\$292.00
26	\$304.19	\$289.88	\$282.70	\$275.77	\$251.97	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$172.73	\$180.19	\$174.89	\$163.32	\$244.33	\$292.00
27	\$304.19	\$289.88	\$282.70	\$275.77	\$251.97	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$172.73	\$180.19	\$174.89	\$163.32	\$244.33	\$292.00
28	\$311.30	\$296.65	\$289.31	\$282.22	\$257.86	\$258.22	\$258.74	\$233.16	\$218.96	\$217.43	\$224.86	\$176.77	\$176.77	\$184.40	\$178.98	\$167.14	\$250.04	\$298.82
29	\$318.00	\$303.03	\$295.54	\$288.29	\$263.41	\$263.78	\$264.31	\$238.17	\$223.67	\$222.11	\$229.69	\$180.57	\$180.57	\$188.37	\$182.83	\$170.74	\$255.42	\$305.25
30	\$325.95	\$310.61	\$302.92	\$295.50	\$269.99	\$270.37	\$270.91	\$244.13	\$229.26	\$227.66	\$235.44	\$185.08	\$185.08	\$187.40	\$175.00	\$206.30	\$261.80	\$312.88
31	\$334.31	\$318.58	\$310.70	\$303.08	\$276.93	\$277.31	\$277.87	\$255.15	\$235.50	\$231.48	\$235.40	\$189.83	\$189.83	\$198.03	\$192.21	\$179.50	\$211.59	\$268.52
32	\$341.85	\$325.76	\$317.70	\$309.91	\$283.17	\$283.56	\$284.13	\$256.04	\$240.44	\$238.76	\$246.92	\$194.11	\$194.11	\$202.49	\$196.54	\$183.54	\$216.36	\$274.57
33	\$349.80	\$333.34	\$325.09	\$317.12	\$289.75	\$290.15	\$290.74	\$261.99	\$246.03	\$244.32	\$252.66	\$198.63	\$198.63	\$207.20	\$201.11	\$187.81	\$221.39	\$280.96
34	\$358.16	\$341.31	\$332.87	\$324.70	\$296.68	\$297.09	\$297.69	\$268.26	\$251.92	\$250.16	\$258.71	\$205.92	\$205.92	\$212.16	\$192.30	\$182.68	\$226.69	\$287.68
35	\$366.53	\$349.29	\$340.64	\$332.29	\$303.61	\$304.04	\$304.65	\$274.53	\$257.81	\$256.01	\$264.75	\$206.13	\$206.13	\$212.12	\$210.74	\$196.79	\$221.99	\$294.40
36	\$374.90	\$357.26	\$348.42	\$339.88	\$310.55	\$310.98	\$311.60	\$280.79	\$263.69	\$261.85	\$270.80	\$212.88	\$212.88	\$222.07	\$215.55	\$201.29	\$237.28	\$301.12
37	\$383.27	\$365.24	\$356.20	\$347.46	\$317.48	\$317.92	\$318.56	\$287.06	\$269.58	\$267.70	\$276.84	\$217.63	\$217.63	\$227.03	\$220.36	\$205.78	\$242.58	\$307.85
38	\$387.87	\$369.62	\$360.48	\$351.64	\$321.29	\$321.74	\$322.39	\$290.51	\$270.91	\$268.97	\$278.17	\$220.25	\$220.25	\$229.76	\$223.00	\$208.25	\$245.49	\$311.54
39	\$392.47	\$374.01	\$364.75	\$355.81	\$325.10	\$325.55	\$326.21	\$293.96	\$276.05	\$274.12	\$283.49	\$222.86	\$222.86	\$232.48	\$225.65	\$210.72	\$248.41	\$315.24
40	\$407.96	\$388.76	\$379.14	\$369.84	\$337.93	\$338.40	\$339.08	\$305.55	\$286.94	\$284.94	\$294.67	\$231.65	\$231.65	\$241.65	\$234.55	\$219.04	\$258.20	\$327.67
41	\$423.86	\$403.91	\$393.92	\$384.26	\$351.10	\$351.58	\$352.29	\$317.46	\$298.13	\$296.04	\$306.16	\$240.68	\$240.68	\$251.07	\$243.69	\$227.57	\$268.27	\$340.45
42	\$440.59	\$419.86	\$409.47	\$399.43	\$364.96	\$365.47	\$366.20	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$250.18	\$260.99	\$253.32	\$236.56	\$278.86	\$353.89
43	\$457.75	\$436.21	\$425.42	\$414.98	\$379.17	\$379.70	\$380.46	\$342.84	\$321.96	\$319.71	\$330.64	\$259.92	\$259.92	\$271.15	\$263.18	\$245.77	\$289.72	\$367.67
44	\$475.74	\$453.36	\$442.14	\$431.29	\$394.62	\$395.42	\$396.32	\$356.32	\$334.62	\$332.28	\$343.64	\$270.14	\$270.14	\$281.80	\$273.52	\$255.43	\$301.11	\$382.12
45	\$494.15	\$470.90	\$459.25	\$447.98	\$409.32	\$409.89	\$410.72	\$370.11	\$347.57	\$345.14	\$356.93	\$280.59	\$280.59	\$292.71	\$284.11	\$265.31	\$312.76	\$396.91
46	\$513.40	\$489.24	\$477.14	\$465.43	\$425.27	\$426.72	\$428.86	\$384.52	\$361.11	\$358.58	\$370.84	\$291.52	\$291.52	\$304.11	\$295.17	\$275.65	\$324.94	\$412.37
47	\$533.48	\$508.38	\$495.80	\$483.64	\$443.41	\$444.52	\$445.52	\$399.57	\$375.23	\$372.61	\$385.34	\$302.93	\$302.93	\$316.01	\$306.72	\$286.43	\$337.65	\$428.50
48	\$554.40	\$528.32	\$515.24	\$502.61	\$459.23	\$459.87	\$460.80	\$415.24	\$389.95	\$387.22	\$400.45	\$314.81	\$314.81	\$328.40	\$318.75	\$297.66	\$350.89	\$445.30
49	\$576.16	\$549.05	\$535.47	\$522.33	\$478.88	\$477.26	\$481.53	\$440.25	\$402.42	\$402.42	\$416.17	\$327.16	\$327.16	\$341.29	\$331.26	\$309.35	\$364.66	\$462.78
50	\$598.75	\$570.58	\$556.46	\$542.82	\$495.97	\$496.66	\$497.66	\$448.45	\$421.14	\$418.20	\$432.49	\$339.99	\$339.99	\$354.67	\$344.25	\$321.48	\$378.96	\$480.92
51	\$622.18	\$592.91	\$578.24	\$564.06	\$515.38	\$516.10	\$517.14	\$466.00	\$437.62	\$434.57	\$449.42	\$355.30	\$355.30	\$368.55	\$357.72	\$334.06	\$393.79	\$499.75
52	\$646.45	\$616.04	\$600.79	\$586.06	\$535.48	\$536.23	\$537.31	\$484.18	\$454.69	\$451.52	\$466.94	\$367.08	\$367.08	\$382.93	\$371.67	\$347.09	\$409.15	\$519.24
53	\$671.56	\$639.96	\$624.13	\$608.82	\$556.28	\$557.05	\$558.17	\$502.98	\$472.35	\$469.05	\$485.08	\$381.33	\$381.33	\$397.80	\$386.11	\$360.57	\$425.04	\$539.40
54	\$697.92	\$665.08	\$648.62	\$632.72	\$578.11	\$578.92	\$580.08	\$522.73	\$490.89	\$487.46	\$504.12	\$396.30	\$396.30	\$413.41	\$401.26	\$374.72	\$441.73	\$560.57
55	\$725.12	\$691.00	\$673.90	\$657.37	\$600.64	\$601.48	\$602.69	\$543.10	\$510.02	\$506.46	\$523.76	\$411.74	\$411.74	\$429.52	\$416.90	\$389.32	\$458.94	\$582.42
56	\$753.57	\$718.11	\$700.34	\$683.17	\$624.21	\$625.08	\$626.34	\$564.41	\$530.03	\$526.33	\$544.32	\$427.90	\$427.90	\$446.38	\$433.26	\$404.60	\$476.95	\$605.27
57	\$782.86	\$746.02	\$727.56	\$709.72	\$648.47	\$649.37	\$650.68	\$586.34	\$550.64	\$546.79	\$565.47	\$444.53	\$444.53	\$463.73	\$450.10	\$420.32	\$495.49	\$628.80
58	\$813.40	\$775.13	\$755.95	\$737.41	\$673.77	\$674.71	\$676.07	\$609.22	\$572.12	\$568.12	\$587.53	\$461.88	\$461.88	\$481.82	\$467.66	\$436.72	\$514.82	\$653.33
59	\$845.20	\$805.43	\$785.50	\$766.24	\$700.11	\$701.09	\$703.44	\$633.04	\$594.49	\$590.33	\$610.50	\$479.93	\$479.93	\$498.70	\$485.94	\$453.80	\$534.94	\$678.87
60	\$878.26	\$836.93	\$816.23	\$796.21	\$727.49	\$728.51	\$729.97	\$657.80	\$617.74	\$613.42	\$634.38	\$498.70	\$498.70	\$520.24	\$504.95	\$471.54	\$555.87	\$705.42
61	\$912.57	\$869.63	\$848.11	\$827.31	\$755.92	\$756.96	\$758.49	\$683.49	\$641.87	\$637.38	\$659.16	\$518.18	\$518.18	\$540.56	\$524.67	\$489.97	\$577.58	\$732.98
62	\$912.57	\$869.63	\$848.11	\$827.31	\$755.92	\$756.96	\$758.49	\$683.49	\$641.87	\$637.38	\$659.16	\$518.18	\$518.18	\$540.56	\$524.67	\$489.97	\$577.58	\$732.98
63	\$912.57	\$869.63	\$848.11	\$827.31	\$755.92	\$756.96	\$758.49	\$683.49	\$641.87	\$637.38	\$659.16	\$518.18	\$518.18	\$540.56	\$524.67	\$489.97	\$577.58	\$732.98
64+	\$912.57	\$869.63	\$848.11	\$827.31	\$755.92	\$756.96	\$758.49	\$683.49	\$641.87	\$637.38	\$659.16	\$518.18	\$518.18	\$540.56	\$524.67	\$489.97	\$577.58	\$732.98

Rates effective April 1, 2014
District of Columbia Small Group Exchange
Appendix II-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	P DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$287.33	\$273.81	\$267.03	\$260.48	\$238.00	\$238.33
21	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
22	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
23	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
24	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
25	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
26	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
27	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
28	\$326.87	\$311.49	\$303.78	\$296.33	\$270.76	\$271.13
29	\$333.90	\$318.19	\$310.31	\$302.70	\$276.58	\$276.96
30	\$342.24	\$326.14	\$318.07	\$310.27	\$283.49	\$283.89
31	\$351.03	\$334.51	\$326.24	\$318.24	\$290.77	\$291.18
32	\$358.94	\$342.05	\$333.59	\$325.41	\$297.32	\$297.74
33	\$367.29	\$350.00	\$341.34	\$332.97	\$304.24	\$304.66
34	\$376.07	\$358.38	\$349.51	\$340.94	\$311.52	\$311.95
35	\$384.86	\$366.75	\$357.68	\$348.90	\$318.79	\$319.24
36	\$393.65	\$375.12	\$365.84	\$356.87	\$326.07	\$326.53
37	\$402.43	\$383.50	\$374.01	\$364.84	\$333.35	\$333.81
38	\$407.27	\$388.10	\$378.50	\$369.22	\$337.35	\$337.82
39	\$412.10	\$392.71	\$382.99	\$373.60	\$341.36	\$341.83
40	\$428.35	\$408.20	\$398.10	\$388.34	\$354.82	\$355.32
41	\$445.05	\$424.11	\$413.61	\$403.47	\$368.65	\$369.16
42	\$462.62	\$440.85	\$429.95	\$419.40	\$383.21	\$383.74
43	\$480.63	\$458.02	\$446.69	\$435.73	\$398.13	\$398.68
44	\$499.53	\$476.02	\$464.24	\$452.86	\$413.78	\$414.35
45	\$518.86	\$494.44	\$482.21	\$470.38	\$429.79	\$430.39
46	\$539.07	\$513.70	\$500.99	\$488.71	\$446.53	\$447.15
47	\$560.15	\$533.80	\$520.59	\$507.82	\$464.00	\$464.64
48	\$582.12	\$554.73	\$541.01	\$527.74	\$482.20	\$482.86
49	\$604.97	\$576.50	\$562.24	\$548.45	\$501.12	\$501.81
50	\$628.69	\$599.11	\$584.29	\$569.96	\$520.77	\$521.49
51	\$653.29	\$622.56	\$607.15	\$592.26	\$541.15	\$541.90
52	\$678.78	\$646.84	\$630.83	\$615.36	\$562.26	\$563.04
53	\$705.14	\$671.96	\$655.33	\$639.26	\$584.09	\$584.90
54	\$732.81	\$698.33	\$681.06	\$664.35	\$607.02	\$607.86
55	\$761.37	\$725.55	\$707.60	\$690.24	\$630.67	\$631.55
56	\$791.25	\$754.02	\$735.36	\$717.33	\$655.42	\$656.33
57	\$822.00	\$783.32	\$763.94	\$745.21	\$680.90	\$681.84
58	\$854.07	\$813.89	\$793.75	\$774.28	\$707.46	\$708.44
59	\$887.46	\$845.70	\$824.78	\$804.55	\$735.12	\$736.14
60	\$922.17	\$878.78	\$857.04	\$836.02	\$763.87	\$764.93
61	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81
62	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81
63	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81
64+	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective July 1, 2014
District of Columbia Small Group Exchange
Appendix III-A

	1		2		3		4		5		6		7		9		10		11		12		14		15		16		17		18		19		20		
	Platinum		Platinum		Gold		Gold		Gold		Gold		Gold		Silver		Silver		Silver		Silver		Bronze		Bronze		Bronze		Bronze		Bronze		Silver		Gold		
Age	P	DC	P	DC	P	DC	P	DC	P	DC	P	DC	P	DC	P	DC	P	DC	P	DC	P	DC	P	DC	P	DC	P	DC	P	DC	P	DC	P	DC	P	DC	
20 and Under																																					
	\$276.01		\$276.02		\$256.51		\$256.51		\$250.22		\$228.63		\$228.63		\$229.41		\$206.72		\$194.13		\$192.78		\$199.37		\$156.73		\$158.69		\$163.49		\$148.19		\$174.69		\$148.19		\$264.94
21	\$306.82		\$292.38		\$285.15		\$278.15		\$278.15		\$254.15		\$254.15		\$255.01		\$229.80		\$215.80		\$214.30		\$221.62		\$174.22		\$181.74		\$176.40		\$164.73		\$194.19		\$246.44		\$294.52
22	\$306.82		\$292.38		\$285.15		\$278.15		\$278.15		\$254.15		\$254.15		\$255.01		\$229.80		\$215.80		\$214.30		\$221.62		\$174.22		\$181.74		\$176.40		\$164.73		\$194.19		\$246.44		\$294.52
23	\$306.82		\$292.38		\$285.15		\$278.15		\$278.15		\$254.15		\$254.15		\$255.01		\$229.80		\$215.80		\$214.30		\$221.62		\$174.22		\$181.74		\$176.40		\$164.73		\$194.19		\$246.44		\$294.52
24	\$306.82		\$292.38		\$285.15		\$278.15		\$278.15		\$254.15		\$254.15		\$255.01		\$229.80		\$215.80		\$214.30		\$221.62		\$174.22		\$181.74		\$176.40		\$164.73		\$194.19		\$246.44		\$294.52
25	\$306.82		\$292.38		\$285.15		\$278.15		\$278.15		\$254.15		\$254.15		\$255.01		\$229.80		\$215.80		\$214.30		\$221.62		\$174.22		\$181.74		\$176.40		\$164.73		\$194.19		\$246.44		\$294.52
26	\$306.82		\$292.38		\$285.15		\$278.15		\$278.15		\$254.15		\$254.15		\$255.01		\$229.80		\$215.80		\$214.30		\$221.62		\$174.22		\$181.74		\$176.40		\$164.73		\$194.19		\$246.44		\$294.52
27	\$306.82		\$292.38		\$285.15		\$278.15		\$278.15		\$254.15		\$254.15		\$255.01		\$229.80		\$215.80		\$214.30		\$221.62		\$174.22		\$181.74		\$176.40		\$164.73		\$194.19		\$246.44		\$294.52
28	\$313.99		\$299.22		\$291.81		\$284.66		\$260.09		\$260.45		\$260.98		\$235.17		\$220.85		\$219.31		\$218.29		\$226.80		\$188.99		\$180.53		\$168.58		\$198.73		\$252.20		\$301.40		\$330.98
29	\$320.74		\$305.65		\$298.09		\$290.78		\$265.68		\$266.05		\$266.59		\$240.23		\$225.60		\$224.02		\$182.13		\$189.99		\$184.41		\$172.21		\$203.00		\$257.62		\$307.89		\$336.68		\$346.78
30	\$328.76		\$313.29		\$305.54		\$298.05		\$272.33		\$272.70		\$273.25		\$231.24		\$229.62		\$237.47		\$186.68		\$194.74		\$189.02		\$176.52		\$208.08		\$264.06		\$311.58		\$351.88		\$383.58
31	\$337.20		\$321.34		\$313.39		\$305.70		\$279.32		\$279.71		\$282.27		\$237.18		\$235.52		\$243.57		\$191.47		\$199.74		\$235.87		\$181.05		\$213.42		\$270.84		\$323.69		\$362.98		\$393.89
32	\$344.80		\$328.58		\$320.45		\$312.59		\$285.61		\$286.01		\$286.58		\$258.25		\$242.52		\$240.83		\$249.05		\$195.79		\$204.24		\$198.24		\$218.23		\$276.95		\$330.98		\$368.88		\$400.00
33	\$352.82		\$336.22		\$327.90		\$319.86		\$292.25		\$292.66		\$293.25		\$264.25		\$248.16		\$246.43		\$254.85		\$200.34		\$208.99		\$202.85		\$223.31		\$283.39		\$338.68		\$376.54		\$408.00
34	\$361.26		\$344.26		\$335.74		\$327.51		\$299.24		\$299.66		\$300.26		\$270.58		\$252.32		\$250.94		\$269.94		\$205.13		\$213.99		\$212.56		\$233.99		\$296.95		\$351.88		\$393.89		\$425.00
35	\$369.70		\$352.30		\$343.59		\$335.16		\$306.24		\$306.66		\$307.28		\$276.90		\$260.03		\$259.22		\$267.04		\$209.93		\$218.99		\$212.56		\$233.99		\$296.95		\$351.88		\$393.89		\$425.00
36	\$378.14		\$360.35		\$351.43		\$342.81		\$313.23		\$313.66		\$314.30		\$283.22		\$265.97		\$264.11		\$273.14		\$214.72		\$223.99		\$217.41		\$230.03		\$239.33		\$303.73		\$362.98		\$393.89
37	\$386.58		\$368.39		\$359.28		\$350.46		\$320.22		\$320.66		\$321.31		\$289.54		\$271.91		\$270.01		\$279.23		\$219.51		\$228.99		\$222.26		\$244.67		\$310.50		\$371.08		\$408.00		\$440.00
38	\$391.22		\$372.81		\$363.59		\$354.67		\$324.07		\$324.52		\$325.17		\$293.02		\$273.17		\$273.25		\$282.59		\$222.15		\$231.74		\$224.93		\$247.61		\$314.23		\$375.54		\$408.00		\$440.00
39	\$395.86		\$377.24		\$367.90		\$358.88		\$327.91		\$328.37		\$329.03		\$296.49		\$278.44		\$278.49		\$285.94		\$224.78		\$234.49		\$227.60		\$247.61		\$314.23		\$375.54		\$408.00		\$440.00
40	\$411.48		\$392.12		\$382.42		\$373.04		\$340.85		\$341.32		\$342.01		\$308.19		\$289.42		\$287.40		\$297.22		\$233.65		\$243.74		\$236.58		\$250.93		\$260.43		\$330.50		\$394.99		\$425.00
41	\$427.52		\$407.40		\$397.32		\$387.58		\$354.13		\$355.34		\$356.34		\$320.20		\$300.70		\$298.60		\$308.80		\$242.76		\$253.24		\$245.80		\$270.58		\$343.39		\$410.38		\$440.00		\$475.00
42	\$444.40		\$423.49		\$413.01		\$402.88		\$368.11		\$369.37		\$372.85		\$332.85		\$312.57		\$310.39		\$321.00		\$252.34		\$263.24		\$255.50		\$238.60		\$321.27		\$356.94		\$426.59		\$456.52
43	\$461.70		\$439.98		\$429.09		\$418.57		\$382.45		\$382.98		\$383.75		\$345.81		\$324.75		\$322.48		\$333.50		\$262.17		\$273.49		\$265.45		\$252.92		\$320.84		\$370.84		\$441.19		\$471.00
44	\$479.85		\$457.27		\$445.96		\$435.02		\$397.48		\$398.03		\$398.83		\$357.51		\$337.15		\$335.15		\$346.60		\$272.47		\$284.24		\$275.89		\$257.64		\$303.71		\$385.42		\$460.61		\$490.61
45	\$498.42		\$474.97		\$463.21		\$451.85		\$412.86		\$413.43		\$414.27		\$373.31		\$350.57		\$348.12		\$360.02		\$283.02		\$295.24		\$286.56		\$267.61		\$315.46		\$400.33		\$478.44		\$508.44
46	\$517.83		\$493.47		\$481.26		\$469.45		\$429.54		\$430.40		\$431.24		\$387.85		\$364.23		\$361.68		\$374.04		\$294.04		\$306.74		\$297.72		\$278.03		\$327.75		\$415.93		\$497.08		\$527.08
47	\$538.09		\$512.77		\$500.08		\$487.82		\$445.72		\$446.34		\$447.24		\$403.02		\$378.47		\$375.83		\$388.67		\$305.54		\$318.74		\$309.37		\$288.90		\$340.57		\$432.20		\$516.52		\$546.52
48	\$559.19		\$532.88		\$519.69		\$506.95		\$463.20		\$464.78		\$465.82		\$418.82		\$393.32		\$390.57		\$403.91		\$317.53		\$331.24		\$321.50		\$300.23		\$353.92		\$449.15		\$536.78		\$566.78
49	\$581.14		\$553.79		\$540.09		\$526.84		\$481.38		\$482.05		\$483.02		\$435.26		\$408.75		\$405.90		\$419.76		\$329.99		\$344.24		\$334.12		\$312.02		\$367.81		\$466.77		\$557.84		\$587.84
50	\$603.93		\$575.51		\$561.27		\$547.50		\$500.26		\$500.95		\$501.96		\$452.33		\$424.78		\$421.81		\$436.23		\$342.93		\$357.74		\$347.22		\$324.25		\$382.24		\$485.08		\$579.72		\$609.72
51	\$627.56		\$598.03		\$583.23		\$568.93		\$519.83		\$520.55		\$521.60		\$470.03		\$438.32		\$435.30		\$450.81		\$356.35		\$371.74		\$360.81		\$336.94		\$397.19		\$504.06		\$602.40		\$632.40
52	\$652.04		\$621.36		\$605.98		\$591.12		\$540.11		\$540.86		\$541.95		\$488.36		\$456.62		\$453.42		\$470.98		\$370.25		\$386.24		\$374.88		\$350.08		\$412.69		\$523.72		\$625.90		\$655.90
53	\$677.36		\$645.49		\$629.52		\$614.08		\$561.08		\$561.86		\$563.00		\$507.33		\$476.43		\$473.10		\$489.27		\$384.63		\$401.23		\$389.44		\$363.68		\$428.71		\$544.06		\$650.21		\$680.21
54	\$703.95		\$670.82		\$654.23		\$638.18		\$583.11		\$583.92		\$585.09		\$527.24		\$495.13		\$491.67		\$508.47		\$399.72		\$416.98		\$404.73		\$377.96		\$445.54		\$565.42		\$675.73		\$705.73
55	\$731.38		\$696.97		\$679.72		\$663.05		\$605.83		\$606.67		\$607.90		\$547.79		\$514.43		\$510.83		\$528.29		\$415.30		\$433.23		\$420.50		\$392.68		\$462.90		\$587.45		\$702.06		\$732.06
56	\$760.08		\$724.51		\$706.39		\$689.07		\$630.60		\$631.75		\$633.48		\$569.28		\$534.61		\$530.88		\$550.02		\$431.60		\$450.23		\$437.00		\$408.09		\$481.07		\$601.50		\$722.61		\$752.61
57	\$789.62		\$752.47		\$733.85		\$715.85		\$654.07		\$654.98		\$656.30		\$591.41		\$555.39		\$551.51		\$570.36		\$448.37		\$467.73		\$453.99										

Rates effective July 1, 2014
District of Columbia Small Group Exchange
Appendix III-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	P DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$289.81	\$276.17	\$269.34	\$262.73	\$240.06	\$240.39
21	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
22	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
23	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
24	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
25	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
26	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
27	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
28	\$329.69	\$314.18	\$306.40	\$298.89	\$273.10	\$273.47
29	\$336.78	\$320.93	\$312.99	\$305.32	\$278.97	\$279.36
30	\$345.20	\$328.96	\$320.82	\$312.95	\$285.94	\$286.34
31	\$354.06	\$337.40	\$329.06	\$320.98	\$293.28	\$293.69
32	\$362.04	\$345.00	\$336.47	\$328.22	\$299.89	\$300.31
33	\$370.46	\$353.03	\$344.29	\$335.85	\$306.87	\$307.29
34	\$379.32	\$361.47	\$352.53	\$343.88	\$314.21	\$314.64
35	\$388.18	\$369.92	\$360.77	\$351.92	\$321.55	\$321.99
36	\$397.05	\$378.36	\$369.00	\$359.95	\$328.89	\$329.35
37	\$405.91	\$386.81	\$377.24	\$367.99	\$336.23	\$336.70
38	\$410.78	\$391.46	\$381.77	\$372.41	\$340.27	\$340.74
39	\$415.66	\$396.10	\$386.30	\$376.83	\$344.31	\$344.78
40	\$432.05	\$411.72	\$401.54	\$391.69	\$357.89	\$358.38
41	\$448.89	\$427.77	\$417.19	\$406.96	\$371.84	\$372.35
42	\$466.62	\$444.66	\$433.66	\$423.02	\$386.52	\$387.06
43	\$484.79	\$461.98	\$450.55	\$439.50	\$401.57	\$402.13
44	\$503.84	\$480.13	\$468.25	\$456.77	\$417.35	\$417.93
45	\$523.34	\$498.71	\$486.38	\$474.45	\$433.50	\$434.10
46	\$543.72	\$518.14	\$505.32	\$492.93	\$450.39	\$451.01
47	\$564.99	\$538.41	\$525.09	\$512.21	\$468.01	\$468.66
48	\$587.15	\$559.52	\$545.68	\$532.30	\$486.36	\$487.04
49	\$610.19	\$581.48	\$567.09	\$553.19	\$505.45	\$506.15
50	\$634.12	\$604.29	\$589.33	\$574.88	\$525.27	\$526.00
51	\$658.94	\$627.93	\$612.40	\$597.38	\$545.82	\$546.58
52	\$684.64	\$652.43	\$636.28	\$620.68	\$567.11	\$567.90
53	\$711.23	\$677.76	\$660.99	\$644.78	\$589.14	\$589.96
54	\$739.14	\$704.37	\$686.94	\$670.09	\$612.26	\$613.11
55	\$767.95	\$731.81	\$713.71	\$696.20	\$636.12	\$637.01
56	\$798.08	\$760.53	\$741.71	\$723.52	\$661.08	\$662.00
57	\$829.10	\$790.09	\$770.54	\$751.64	\$686.78	\$687.73
58	\$861.45	\$820.92	\$800.60	\$780.97	\$713.57	\$714.56
59	\$895.13	\$853.01	\$831.90	\$811.50	\$741.47	\$742.50
60	\$930.13	\$886.37	\$864.44	\$843.24	\$770.47	\$771.54
61	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68
62	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68
63	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68
64+	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective October 1, 2014
District of Columbia Small Group Exchange
Appendix IV-A

[illegible]

Rates effective October 1, 2014
District of Columbia Small Group Exchange
Appendix IV-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	P DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$292.31	\$278.56	\$271.67	\$265.00	\$242.13	\$242.47
21	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
22	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
23	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
24	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
25	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
26	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
27	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
28	\$332.54	\$316.89	\$309.05	\$301.47	\$275.45	\$275.84
29	\$339.69	\$323.71	\$315.70	\$307.95	\$281.38	\$281.77
30	\$348.18	\$331.80	\$323.59	\$315.65	\$288.41	\$288.81
31	\$357.12	\$340.32	\$331.90	\$323.76	\$295.82	\$296.23
32	\$365.17	\$347.98	\$339.37	\$331.05	\$302.48	\$302.90
33	\$373.66	\$356.08	\$347.27	\$338.75	\$309.52	\$309.95
34	\$382.60	\$364.60	\$355.57	\$346.85	\$316.92	\$317.36
35	\$391.54	\$373.11	\$363.88	\$354.96	\$324.33	\$324.78
36	\$400.48	\$381.63	\$372.19	\$363.06	\$331.73	\$332.19
37	\$409.41	\$390.15	\$380.50	\$371.17	\$339.13	\$339.61
38	\$414.33	\$394.84	\$385.07	\$375.62	\$343.21	\$343.68
39	\$419.25	\$399.52	\$389.64	\$380.08	\$347.28	\$347.76
40	\$435.79	\$415.28	\$405.01	\$395.07	\$360.98	\$361.48
41	\$452.77	\$431.47	\$420.79	\$410.47	\$375.05	\$375.57
42	\$470.65	\$448.50	\$437.41	\$426.68	\$389.86	\$390.40
43	\$488.97	\$465.97	\$454.44	\$443.29	\$405.04	\$405.60
44	\$508.19	\$484.28	\$472.30	\$460.72	\$420.96	\$421.54
45	\$527.86	\$503.02	\$490.58	\$478.54	\$437.25	\$437.85
46	\$548.42	\$522.62	\$509.68	\$497.18	\$454.28	\$454.91
47	\$569.87	\$543.06	\$529.62	\$516.63	\$472.05	\$472.70
48	\$592.22	\$564.36	\$550.39	\$536.89	\$490.56	\$491.24
49	\$615.46	\$586.50	\$571.99	\$557.96	\$509.81	\$510.52
50	\$639.60	\$609.50	\$594.42	\$579.85	\$529.81	\$530.54
51	\$664.63	\$633.36	\$617.69	\$602.54	\$550.54	\$551.30
52	\$690.55	\$658.06	\$641.78	\$626.04	\$572.01	\$572.81
53	\$717.37	\$683.62	\$666.70	\$650.35	\$594.23	\$595.05
54	\$745.53	\$710.45	\$692.87	\$675.88	\$617.55	\$618.41
55	\$774.58	\$738.14	\$719.87	\$702.22	\$641.62	\$642.51
56	\$804.97	\$767.10	\$748.12	\$729.77	\$666.79	\$667.72
57	\$836.26	\$796.91	\$777.20	\$758.13	\$692.71	\$693.67
58	\$868.89	\$828.01	\$807.52	\$787.71	\$719.74	\$720.74
59	\$902.86	\$860.38	\$839.09	\$818.51	\$747.87	\$748.91
60	\$938.17	\$894.03	\$871.91	\$850.52	\$777.12	\$778.20
61	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60
62	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60
63	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60
64+	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60

State:	District of Columbia	Filing Company:	Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
TOI/Sub-TOI:	HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO		
Product Name:	2015 DC Small Group		
Project Name/Number:	/		

Supporting Document Schedules

Satisfied - Item:	Actuarial Justification
Comments:	
Attachment(s):	DC 2015 Small Group Actuarial Memorandum_with exhibits.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Actuarial Memorandum
Comments:	
Attachment(s):	DC 2015 Small Group Actuarial Memorandum_with exhibits.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Actuarial Memorandum and Certifications
Comments:	
Attachment(s):	DC 2015 Small Group Actuarial Memorandum_with exhibits.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Certificate of Authority to File
Bypass Reason:	NA
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Consumer Disclosure Form
Bypass Reason:	NA
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Cover Letter All Filings
Comments:	
Attachment(s):	DC 2015 Small Group Rate Filing Cover Letter.pdf
Item Status:	
Status Date:	

State:	District of Columbia	Filing Company:	Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
TOI/Sub-TOI:	HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO		
Product Name:	2015 DC Small Group		
Project Name/Number:	/		

Satisfied - Item:	DISB Actuarial Memorandum Dataset
Comments:	
Attachment(s):	2015 Individual DISB Actuarial Memo Dataset.xlsx Kaiser Small Group DISB Plain Language Summary.pdf
Item Status:	
Status Date:	

Bypassed - Item:	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)
Bypass Reason:	NA
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	District of Columbia and Countrywide Loss Ratio Analysis (P&C)
Bypass Reason:	NA
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Unified Rate Review Template
Comments:	
Attachment(s):	plan_management_data_templates_unified_2015_DC_SG_value_no_formula.xlsm plan_management_data_templates_unified_2015_DC_SG.pdf
Item Status:	
Status Date:	

SERFF Tracking #:

KPMA-129593007

State Tracking #:

Company Tracking #:

State:

District of Columbia

Filing Company:

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

TOI/Sub-TOI:

HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

Product Name:

2015 DC Small Group

Project Name/Number:

/

Attachment 2015 Individual DISB Actuarial Memo Dataset.xlsx is not a PDF document and cannot be reproduced here.

Attachment plan_management_data_templates_unified_2015_DC_SG_value_no_formula.xlsm is not a PDF document and cannot be reproduced here.

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

District of Columbia

2015 Small Group Rate Filing

HIOS Issuer ID 94506

HIOS Product ID 94506DC035, 94506DC036

Form Numbers DC-SG-HMO-FACE(01-14)HIX, DC-SG-POS-FACE(01-14)HIX, EOC-COVER (1-05), DC-SG-WRAP(01-14)HIX, KFHP-EOC COVER (01/10)DC, DCLG-ALL-TOC(1-05), DC-SG-SEC1(01-15)HIX, DC-SG-SEC2(01-15)HIX, DC-SG-SEC3(01-15)HIX, DC-SG-SEC4(01-14)HIX, DC-SG-SEC5(01-14)HIX, DC-SG-SEC6(01-15)HIX, DC-SG-SEC7(01-14)HIX, DC-SG-APPX-DEF(01-15)HIX, DC-SG-PLATINUM-0-20-DENTAL-HMO-COST(01-15)HIX, DC-SG-GOLD-0-20-DENTAL-HMO-COST(01-15)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-COST(01-15)HIX, DC-SG-GOLD-500-20-DENTAL-DHMO-COST(01-15)HIX, DC-SG-GOLD-1000-30-DENTALDHMO-COST(01-15)HIX, DC-SG-SILVER-1250-35-DENTALDHMO-COST(01-15)HIX, DC-SG-SILVER-2000-35-DENTALDHMO-COST(01-15)HIX, DC-SG-BRONZE-4500-50-DENTALDHMO-COST(01-15)HIX, DC-SG-GOLD-1250-10-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-GOLD-1250-0%-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-SILVER-1500-30-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-SILVER-1500-30-10%-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-BRONZE-3500-20%-HSADENTAL-HDHP-COST(01-15), DC-SG-BRONZE-4500-20-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-BRONZE-2750-40-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-BRONZE-4500-50-POSDENTAL-COST(01-15)HIX, DC-SG-GOLD-1000-30-POSDENTAL-COST(01-15)HIX, DC-SG-SILVER-2000-35-POSDENTAL-COST(01-15)HIX, DC-SG-PLATINUM-0-20-DENTALHMO-RX(01-15)HIX, DC-SG-GOLD-0-20-DENTAL-HMORX(01-15)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-RX(01-15)HIX, DC-SG-GOLD-500-20-DENTALDHMO-RX(01-15)HIX, DC-SG-GOLD-1000-30-DENTALDHMO-RX(01-15)HIX, DC-SG-SILVER-1250-35-DENTALDHMO-RX(01-15)HIX, DC-SG-SILVER-2000-35-DENTALDHMO-RX(01-15)HIX, DC-SG-BRONZE-4500-50-DENTALDHMO-RX(01-15)HIX, DC-SG-GOLD-1250-10-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-GOLD-1250-0%-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-SILVER-1500-30-10%-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-SILVER-1500-30-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-2750-40-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-3500-20%-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-4500-20-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-4500-50-POS-DENTAL-RX(01-15)HIX, DC-SG-GOLD-1000-30-POS-DENTAL-RX(01-15)HIX, DC-SG-SILVER-2000-35-POS-DENTAL-RX(01-15), DC-SG-DENTAL-ADULT(01-14)HIX, DC-SG-PED-DENTAL(01-15)HIX, DC-POS-AMEND(01-14)HIX

Actuarial Memorandum

I, Thomas Ahmann, Actuarial Director for Kaiser Foundation Health Plan, Inc. (Kaiser) am a member of the American Academy of Actuaries. I meet the qualification standards for certifying Regulatory Filings for Rates and Financial Projections for Health Plans. This Actuarial Certification applies to the attached filing for an approval of premium rates for Small Group sold on the exchange. This actuarial memorandum documents the assumptions and sources of data pertaining to the development of Kaiser premium rates effective January 2015. It is intended to comply with the requirements outlined in the DC Health Benefit Exchange Authority's *2015 Carrier Reference Manual* (March 2014, Version 1). It is not intended for any other purpose.

This rate filing applies to forms that are open to new sales and renewals. This filing does not cover grandfathered products that existed prior to March 23, 2010.

Kaiser Foundation Health Plan is an HMO company and offers traditional HMO copayment plans covering medical and pharmacy claims expenses. Kaiser also offers Deductible and High Deductible plans, some of which are HSA qualified and a limited number of Point of Service type plans. For purposes of regulation, these are all HMO products.

Kaiser Permanente will market products to the Individual and Small Group markets through Direct Sales channels and Broker arrangements, as well as on the District of Columbia Marketplace (aka the Exchange). The products are guaranteed issue and guaranteed renewable.

I am responsible for this filing. My telephone number is 510-271-6015 (Pacific time) and my email address is Thomas.M.Ahmann@kp.org.

Proposed Rate Increases

The percent increase in the Market Adjusted Index Rate from 2014 to 2015 is 8.4%. The drivers of that change are shown in the table below, which contains all the components of the Market Adjusted Index Rate calculation. The numbers shown are the ratio of the 2015 to the 2014 factor, so a 1.000 indicates no impact on the rate change.

Source of Change	2015/2014
Based Period Experience	1.059
Base Period Utilization Copay	1.002
Pricing Trend	0.999
Morbidity Adjustment	0.965
Risk Adjustment Recoveries	1.054
Pent Up Demand	1.000
Reinsurance Recoveries	1.000
Reinsurance Premium	0.995
Average Age Impact	0.996
Additional EHB	1.000
Exchange Fee	1.000
Fixed Cost Adjustment	1.014
Total Market Adjusted Index Rate Change	108.4%

Plan level rate changes are shown in row 25 of Worksheet II in the URRT. The biggest contributing factor to plan increases that vary from the Market Adjusted Index Rate change is a change in the methodology for determining the utilization copay effect in the projection period.

For 2015, Kaiser has changed its methodology to determine the utilization copay effect for its plans to better reflect the impact of member cost share. This year, along with copayments, we have considered the deductible levels as well. The result of this change impacts the plans with higher deductibles (i.e. Silver and Bronze) more than the plans with lower deductibles or just copayments (i.e. Platinum and Gold) so those plans show lower increases.

Experience Period Claims

Base period data:

The Revenue Requirement for 2015 for the new ACA plans is developed by accumulating Virginia-specific medical and administrative expenses for essential health benefits (EHB) for non-grandfathered business in the Child-Only, Conversion, Due Subsidy, Individually Medically Underwritten and Small Group lines of business incurred and paid in the period January 2013 through December 2013 including the incurred but not reported estimates for external expense. Allowed cost data from internal costs, fee for service claims, and prescription drug claims are trended to 2015. Allowed claims for internal services come directly from allocated costs while allowed claims for external expenses are calculated as incurred plus member cost sharing.

Capitations:

Kaiser Permanente has contracted with a dental provider to provide dental care to Kaiser members. Kaiser pays the provider a fixed capitation of \$1.15 PMPM to cover adult preventative. The \$1.15 PMPM is part of the base period allowed amount, shown in Exhibit 2. It is then removed as a non-Essential Health Benefit in Exhibit 3. Finally, this benefit is added back as part of the non-EHB adjustment in Exhibit 10.

Incurred Estimates on External Expense:

A common reserve tool developed and maintained by Kaiser Actuarial Services is used to set Kaiser's IBNR reserves. Kaiser's common reserve tool uses historical claim lag averages to project anticipated future payments. IBNR levels are set for line of business and service line breakouts. Note that the IBNR applies only to Kaiser's external allowed costs. Most of Kaiser's expenses are internal fixed costs, which are allocated and lag in reporting is immaterial.

The completion factors used to complete the base period external claims are taken from Kaiser's overall commercial line of business by type of service. The claims are incurred and paid in 2013 so a 12/12 completion factor is used.

Premium:

Premium was captured for calendar year 2013 for all members in the base period single (combined Small Group and Individual) pool. There were no MLR rebates for these members in this period. For Dues Subsidy members, the whole premium was captured and not just the portion paid by the member.

Part I Unified Rate Review Template

Base Period Experience:

The base period experience in Worksheet 1 Section I and in Worksheet 2 Section III is the combined experience of the Small Group and Individual markets. As required, members of Congress and their personal staffs may enroll in the exchange. No experience is included for that block of business. It is expected that the morbidity is similar to the small group pool as a whole. The Index Rate of the Experience Period in cell G17 is taken from Exhibit 1 line 3. It is the per member per month allowed claims less non-essential health benefits from the base period. Therefore, it represents the average age of the members in the risk pool. The Index Rate for the Projection period, discussed below, is taken from Exhibit 1 Line 16.

Benefit Categories:

The benefit categories in Section II of Worksheet I are mapped based on type of service and place of treatment codes. For example:

Benefit Category	Services
Inpatient Hospital	Inpatient Facility, Inpatient Visits (Rounding), Inpatient Surgery - Non Maternity, Maternity
Outpatient Hospital	Outpatient Facility, Emergency/Urgent Care, Hospital Outpatient Other Professional, Outpatient Surgery
Professional	Diagnostic Services, Office Visits, Cardiovascular, Chemotherapy/Pharmacy, Dialysis, PT/OT/ST
Other Medical	Other Services
Capitation	Adult Preventive Dental
Prescription Drug	Pharmacy

Morbidity and Other Adjustments:

The morbidity adjustment in Section II Worksheet I is developed from row (14) of Exhibit 1 and reflect the morbidity in the single risk pool (Small Group and Individual combined) of our expected 2015 membership as well as. The development of these factors along with the documentation of these assumptions is included in Exhibit 7.1-7.3.

The “Other” adjustment in Section II Worksheet I is an adjustment to reflect that family contracts are limited to three dependents in 2015.

Also included in the “Other” adjustment is the base period utilization copay effect from Exhibit 4. The adjustment is necessary to convert the base period experience from an average plan allowed amount to the allowed amount for the reference plan. “Other” also includes additional EHB benefits in the projection period.

All the factors discussed above in the Morbidity and Other Adjustments are based on Small Group and Individual experience combined.

Paid to Allowed Ratio:

The Paid to Allowed Average Factor in Projection Period in Section III of Worksheet I is an average plan factor for the plans listed in Worksheet II. It represents the change from the average benefit plan allowed amount to the average paid amount across the 2015 plans based on weightings in Worksheet 2 of the URRT.

The factor in cell v33 in Worksheet I of the URRT is calculated by weighting the plan design factors in Exhibit 10 by the projected members and allowed costs by plans in rows 81 and 100, respectively, of Worksheet II of the URRT.

Estimated Average Annual Premium per Policy:

The estimated average annual premium per policy based on the URRT and SERFF data included in the filing is \$8,184.76.

Risk Adjustment

Exhibit 7.1-7.3 documents the development of the Risk Adjustment index rate factor. The index rate is adjusted to reflect the expected change in morbidity of the members covered by these plans relative to the members in the base period data. It is also adjusted to reflect the risk adjustment receipts anticipated in the rating period based on the expect risk profile relative to the market of the Small Group line only based on DISB guidance.

Assumptions are documented regarding the current relative morbidity of Kaiser's population along with the expected morbidity of the future market relative to Kaiser. Growth assumptions for the market as a whole and Kaiser specifically are used to calculate Kaiser's 2015 expected relative morbidity to the market. This value is used to determine the expected risk adjustment impact to the market adjusted index rate.

Administrative Expense

Retention includes broker commissions, administrative expenses and capital contribution. Commissions are paid to Brokers of Record. The capital contribution is an amount to maintain and expand medical center facilities where members receive the majority of health care in the Kaiser Foundation Health Plan. As a group model HMO, Kaiser owns a significant portion of the health care delivery system. In other health care delivery models, capital contributions are included in fee for service payments, whereas for Kaiser these are funded through premium rates.

Quarterly Rate Factors

Exhibit 11 contains the quarterly rate factors that will be applied to base rates for 2nd, 3rd and 4th 2015 effective dates. These adjustments are based on an annual trend of 3.5%. Kaiser reserves the right to amend this filing with new quarterly factors based on emerging experience and other subsequent events.

In order for the Index Rate in the Projection Period in Wk1 Section III of the URRT to reflect the average quarterly rate, a weighted average trend adjustment based on the assumed distribution of renewals throughout the year has been development.

	Q1	Q2	Q3	Q4	
Members	1,401	339	409	957	
Trend	3.5%	3.5%	3.5%	3.5%	
Months	24	27	30	33	
	1.072	1.082	1.091	1.101	Proj Index Adj for Small Group
					1.013

Profit and Risk Margin

As mentioned above, the capital contribution of 1%, shown in Exhibit 9, is an amount to maintain and expand medical center facilities where members receive the majority of health care in the Kaiser Foundation Health Plan.

Taxes and Fees

Administrative expense has been adjusted to reflect the PCORI tax and the insurer tax that will apply in 2015. The amount is shown as percent in Exhibit 9.

Projected Loss Ratio

Based on a target admin percentage of 20.93%, which includes a 1% capital contribution margin, we anticipate an MLR based on federally prescribed methodology to be at least 81.07%. The MLR would be expected to be higher due to the required adjustments to both claims and premium in the prescribed methodology.

Market Adjusted Index Rate

The development of the index rate is summarized in Exhibit 1 and is based on combined experience of non-grandfathered Individual and Small Group experience as described above. The following factors along with Risk Adjustment described above have been considered in the development and are documented below.

Utilization copayment effect adjustment:

Allowed claims are grossed up for anticipated changes in the average utilization of services due to average cost sharing requirements in the base period. Member cost sharing results in lower utilization and, thus, lower allowed costs, than would otherwise occur in a zero cost share environment. An estimate based on industry standard factors has been made at the plan level to adjust our base period data to what would have been expected in a zero cost share environment in order to normalize for the utilization copayment effect. These adjustments are documented in Exhibit 4.

Demographic Adjustment:

The Demographic Adjustment shown in Exhibit 5 represents the expected change in the average member age from the base period to the projection period. Because of the lack of credible emerging experience as well as the uncertainty of the increasing mandate in 2015, we have assumed that the average age in the projection period is unchanged from the base period. However, due to slight difference in the average age between the Individual and Small group, there is a small change in the combined average age because of different growth in the Individual and Small Group members.

Embedded Pediatric Dental Adjustment:

Kaiser is embedding pediatric dental benefits into its 2015 plans. Kaiser will pay a dental provider a fixed per child per month capitation. Exhibit 14 shows the assumptions and development of the index rate adjustment factor to reflect the capitation on a per member per month basis by adjusting the index rate.

Trend:

The future trend numbers are based on actuarial judgment considering a mixture of expected industry trends, future fixed costs, and expected internalization of services. As an integrated health care provider, a large portion of Kaiser's expenses are the costs associated with providing medical care through our centers. Therefore, the projected cost that is included in our total revenue requirement is largely based on budgeting. For traditional carriers, projected claims trends are developed to project expected costs. However, given Kaiser's cost structure, Kaiser's projected claims trends fall out of the development of projected budgeted costs. For 2013 to 2015, our projected total internal annualized medical expense trend for Small Group is 3.5% and is shown in Exhibit 6 of our filing.

Alternative AV Calculations

The AV calculator does not have an option for outpatient facility copay. To calculate the impact on the actuarial value of the plan for this benefit we used the alternate method described in 156.135 (b)(2). Last year, Kaiser requested from a major actuarial consulting firm the national average allowed amount for outpatient facility costs in 2014. We have used this same data since HHS has not updated the data from last year's AV calculator. To determine AVs for plans outpatient facility copays, we propose an OP Copay Converter to be used with the AV calculator. To create this converter, we then compared the copay amount to the estimated average national OP facility allowed amount to calculate the implied coinsurance % for OP procedures. This coinsurance should only be applied to the OP facility cost and not the OP professional cost, which should be covered at 100%.

Plan designs have been changed to waive primary office visit copays for children younger than five. As the AV calculator does not have an adjustment to account for this benefit, we lowered the copay amount 16% by multiplying the actual copay by a factor of 0.84. For example, a \$20 primary office visit copay is entered as \$16.80. The 16% adjustment is based on Kaiser data (as a proxy for standard population). Primary care utilization was divided between children under five and all other members. The data showed 16% of primary care visits were attributed to children under five.

AV Pricing Values

The rates for specific plans are calculated by multiplying plan factors times the index rate. The plan factors use industry standard data in a model from a national actuarial consulting firm, calibrated to Kaiser experience to calculate the impact of the various cost share and plan elements for EHBs, including utilization copayment effect.

The reference plan used as the basis for the AV pricing values is a \$0 cost share plan valued using the same industry standard factors described above.

Exhibit 9 indicates the portion of the AV Pricing Value that is attributable to each of the allowable modifiers to the Index Rate. The plan factor shown in Exhibit 9 reflects both member cost shares and the resulting dampening of expected utilization due to those cost shares.

Network Adjustment

Kaiser provides services to its members in its Signature network in its medical offices and externally with contracted providers. Kaiser offers an expanded network of contracted non-Kaiser physicians in its Select network. Rates for products with the Select network are adjusted by a factor of 1.05 for HMO to reflect the additional cost. This adjustment is consistent with the factor already filed in prior filings. For the POS plans, the factor is 1.04, reflecting steerage of 80% for Tier 1.

Age Factors

The age factor table used to develop age specific rates is the standard table provided by DISB.

Exhibit 12 shows the development of the age calibration factor. This factor is new to the methodology in 2015. The development starts with the average age in the projection period from Exhibit 5. That age is rounded to the nearest age and the age factor is pulled from the DISB age curve. As described in the Actuarial Memorandum instructions, the ratio of the age factor for the nearest rounded age to the age factor for the average age in the projection period is the age calibration factor used in the rate development.

Non-EHB

An adjustment has been made to the base period allowed amount to remove the Non-EHB benefits from the Index Rate. This multiplier was calculated by summing the allowed amount for Non-EHB benefits in the base period and adding the adult preventive dental capitation and then dividing by total allowed.

Additional URRT Items

Membership Projections:

The total membership projection included across new plans in Section II of Worksheet 2 is consistent with Kaiser's business plan. Detailed assumptions are presented and documented in Exhibit 7.1-7.3.

An assumption is made in Worksheet 2 as to the distribution of members by product based on Kaiser's expected distribution of membership by metal level.

Terminated Plans:

The following non-grandfathered plans are included in the "Terminate Plans" column in Worksheet 2 of the URRT.

DC Added Choice POS Plan 1 (\$5/\$10)
DC Added Choice POS Plan 2 (\$15/\$25)
DC DHMO Plan 1 (\$10/\$20/\$250 Ded - 90%)
DC DHMO Plan 2 (\$15/\$25/\$500 Ded - 90%)
DC DHMO Plan 3 (\$25/\$35/\$2,000 Ded - 80%)
DC DHMO Plan 4 (\$25/\$35/\$1000 Ded - 80%)
DC Flex Choice Plan 1 (100/90/70 - \$10-\$20 OV)
DC Flex Choice Plan 2 (100/80/60 - \$15-\$25 OV)
DC Flex Choice Plan 3 (100/70/50 - \$25-\$35 OV)
DC Flex Choice Plan 4 (100/80/60 - \$10-\$25 OV)
DC HDHP Plan 1 (\$1,250 Ded - 80%)
DC HDHP Plan 2 (\$1,750 Ded - 70%)

DC HDHP Plan 3 (\$2,250 Ded – 70%)
 DC HDHP Plan 4 (\$1,250 Ded - 100%)
 DC HDHP Plan 5 (\$2,250 Ded - 100%)
 DC HDHP Plan 8 (\$2,800 Ded - 100%)
 DC HMO Plan 1 (\$5/\$10/\$0 IP/\$0 Rx Ded)
 DC HMO Plan 2 (\$10/\$20/\$0 IP/\$0 Rx Ded)
 DC HMO Plan 3 (\$15/\$25/\$0 IP/\$0 Rx Ded)
 DC HMO Plan 4 (\$15/\$30/\$500 IP/\$0 Rx Ded)
 DC HMO Plan 5 (\$20/\$30/\$250 IP/\$0 Rx Ded)
 DC HMO Plan 6 (\$20/\$40/20% IP/\$0 Rx Ded)
 DC HMO Plan 7 (\$10/\$10/\$250 IP/\$0 Rx Ded)
 DC HMO Plan 8 (\$20/\$20/\$500 IP/\$0 Rx Ded)

Warning Alert:

There are no warning alerts in Wk2 of the URRT

Summary Rate Calculation

Exhibit 1 shows the development of the Market Adjusted Index Rate from the base period Medical Cost Data. The Plan Adjusted Index Rates are calculated using the Market Adjusted Index Rate and the allowable plan adjustment factors in Exhibit 9. The final 2015 Consumer Adjusted Premium Rates are developed by applying the age slope and age calibration to the Plan Adjusted Index Rates to generate age specific rates.

Exhibit Table of Contents:

The following exhibits are included in this filing:

- Exhibit 1 – Market Adjusted Index Rate Calculation
- Exhibit 2 –Allowed Claims Development
- Exhibit 3 –Non-EHB Adjustments
- Exhibit 4 – Utilization Copayment Effect Adjustments
- Exhibit 5 – Demographic Adjustment
- Exhibit 6 – Trend Factor
- Exhibits 7.1 - Risk Adjustment and Morbidity Development – Combined Small and Individual
- Exhibits 7.2 - Risk Adjustment and Morbidity Development – Individual Line of Business
- Exhibits 7.3 - Risk Adjustment and Morbidity Development – Small Group Line of Business
- Exhibit 8 – Administrative Expense
- Exhibit 9 – Plan Adjusted Index Rates Development
- Exhibit 10 – AV Calculator Values
- Exhibit 11 – Quarterly Rate Factors
- Exhibit 12 – Age Calibration
- Exhibit 13 – Age Factors
- Exhibit 14 – Pediatric Dental Adjustment Factor
- Appendix I-A - 1st Quarter 2014 Signature Network Rate Sheet
- Appendix I-B - 1st Quarter 2014 Select Network Rate Sheet
- Appendix II-A - 2nd Quarter 2014 Signature Network Rate Sheet
- Appendix II-B - 2nd Quarter 2014 Select Network Rate Sheet
- Appendix III-A - 3rd Quarter 2014 Signature Network Rate Sheet
- Appendix III-B - 3rd Quarter 2014 Select Network Rate Sheet
- Appendix IV-A - 4th Quarter 2014 Signature Network Rate Sheet
- Appendix IV-B - 4th Quarter 2014 Select Network Rate Sheet

Certification

This filing is in conformity with all applicable Actuarial Standards of Practice, including ASOP No. 8. To the best of my knowledge, the rating methodologies of Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. and the development of the Index Rate comply with the applicable District and Federal Statutes and Regulations (45 CFR 156.80(d)(1)). The percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV were calculated in accordance with actuarial standards of practice. The index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates. The rating methodologies produce premiums that are reasonable in relation to benefits being provided and the populations being covered and are based on sound and commonly accepted actuarial principles and are neither excessive nor deficient.



Thomas Ahmann, FSA, MAAA
Actuarial Director
Kaiser Foundation Health Plan, Inc.
6/13/2014

**Index Rate Development
Summary Index Rate Calculation
Exhibit 1**

				<u>Source</u>
(1)	Base Period Allowed	\$333.14	Exhibit 2	
(2)	Non-EHB Claims Adjustment	0.9873	Exhibit 3	
(5)	Adjusted Base Period Allowed	\$328.92	(1) * (2)	
(6)	Base Period Utilization Adjustment	1.088	Exhibit 4	
(7)	Projection Period Utilization Adjustment	0.908		
(8)	Demographic Adjustment	0.996	Exhibit 5	
(9)	Product/Network Moribidty Adjustment	1.000	Exhibit 2	
(10)	Additional EHB (including Ped Dental)	1.01149	Exhibit 14	
(10)	Annualized Trend	3.5%	Exhibit 6	
(11)	Months of Trend	24		
(12)	Trend Factor	1.071	$\{1 + (10)\} ^ \{ (11) / 12 \}$	
(14)	Change in Morbidity	1.050	Exhibit 7	
(15)	Contract Limit of 3 Children Factor	1.005		
(16)	Combined Projection Period Index Rate Prior to Separate Modifiers	369.70	(5) * (6) * (7) * (8) * (9) * (10) * (12) * (13) * (14) * (15)	
(17)	Risk Adjustment	0.956	Exhibit 7	
(18)	Exchange fee	1.0000		
(19)	Reinsurance Premium	1.0104		
(20)	Market Adjusted Index Rate	\$357.14	(16) * (17) * (18) * (19)	

Allowed Claims Development
Exhibit 2

Current Pool	Current Plans	Member Months	Total
Individual	All	12,279	\$304.86
Small Group	All	34,212	\$343.29
Grand Total		46,491	\$333.14

Non-EHB Adjustments
Exhibit 3

Current Pool	Current Plans	Member Months	Non-EHB PMPM
Individual	All	12,279	\$4.06
Small Group	All	34,212	\$4.28
Grand Total		46,491	\$4.22

Multiplier to Remove Non-EHB [1 - (Non-EHB PMPM / Allowed PMPM)]	0.9873
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Utilization Copayment Effect Adjustment
Exhibit 4

Current Pool	Current Plan	Member Months	Allowed Amount	Copay Impact
Individual	All	12,279	\$304.86	0.897
Small Group	All	34,212	\$343.29	0.927
Grand Total		46,491	\$333.14	0.919

Adjustment Factor is the Inverse of the Total	1.088
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**Demographic Adjustment
Exhibit 5**

		Member Months	Average Age Factor ¹	Weighed Average Age ²
Experience Period	Individual	12279	1.0571	42.1
	Small Group	34212	1.0897	42.9
	Combined	46491	1.0811	42.7
Projection Period	Individual	24933	1.0571	42.1
	Small Group	37260	1.0897	42.9
	Combined	62193	1.0766	42.6
Demographic Factor			0.9959	

¹ Average age factor based on CMS Age curve

² Weighted Average Age = Interpolation on age curve of average age factor

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Exhibit 6
Trend Calculation

Category	Weight	2013 to 2015 Annualized Trend
Hospital	14.8%	4.5%
Physician Internal	22.8%	4.0%
Referral	3.6%	4.5%
Rx	15.4%	4.5%
Other	43.5%	2.5%
Composite	100.0%	3.5%

Risk Adjustment and Morbidity Development
Exhibit 7.1

Development of Risk Adjustment Factor Applied to Index Rate

	<u>Small</u>	<u>Individual</u>	<u>Total</u>
Average Members	3,105	2,078	5,183
Adjustment for change in risk in Kaiser membership	99.6%	113.0%	105.0%
Adjustment for risk adjustment recoveries	95.6%	92.2%	

Risk Adjustment and Morbidity Development
Exhibit 7.2

Current Risk Profile of Non-Grandfathered Kaiser members relative to current market

	<u>CY 2013 Member Months</u>	<u>Morbidity</u>
(1) Non-Grandfathered Guaranteed Issue	108	1.468
(2) Non-Grandfathered Medically Underwritten	11,667	0.977
(3) Dues Subsidy	504	1.115
(4) Total	12,279	0.987

Impact of projected membership to Kaiser risk profile in 2015 relative to current market

	<u>Member Months</u>	<u>Morbidity</u>
(5) Current Members [from (4) above]	12,279	0.987
(6) Gender to Unisex Selection Adjustment	11,667	1.100
(7) Total Morbidity Change	12,279	1.081
(8) New Entrants previously uninsured	6,327	1.300
(9) Transfers from other carriers or other KP Segments	6,327	1.000
(10) Subtotal	24,933	1.116

Impact to Current Market from all new entrants in 2015

	<u>Member Months</u>	<u>Risk Relativity</u>
(11) Current Market	211,205	1.000
(12) Uninsured New Entrants	25,246	1.300
(13) Transfers from Group	25,246	1.000
(14) 2015 Market	261,697	1.029
(15) Kaiser risk relativity to 2015 market [(10) / (14)]		1.085
(16) Pent Up Demand Factor for New Entrants		1.000
(17) Adjustment for change in risk in Kaiser membership [(10) / (4)]		113.0%
(18) Adjustment for risk adjustment recoveries [1 / (15)]		92.2%
(19) Adjustment for Pent Up Demand [{ (8) mems * (16) + (5) mems + (9) mems } / (10) mems }]		100.0%

**Risk Adjustment Factor
Exhibit 7.3**

Current Risk Profile of Non-Grandfathered Kaiser members relative to current market

	<u>CY 2013 Member Months</u>	<u>Morbidity</u>
(1) Non-Grandfathered ¹	34,212	1.050

Impact of projected membership to Kaiser risk profile in 2015 relative to current market

	<u>Members Months</u>	<u>Morbidity</u>
(2) Current Members [from (4) above]	34,212	1.050
(3) New to Kaiser	3,048	1.000
(4) Subtotal	37,260	1.046

	<u>Member Months</u>	
(5) 2015 Market	568,490	1.000
(6) Kaiser risk relativity to 2015 market [(4) / (5)]		1.046

Development of Risk Adjustment Factor Applied to Index Rate

(7) Adjustment for change in risk in Kaiser membership [(4) / (1)]	99.6%
(8) Adjustment for risk adjustment recoveries [1 / (6)]	95.6%
(9) Total Adjustment [(7) * (8)]	95.2%

¹ Current Kaiser portfolio is expected to be 1.05 to market.

Administrative Expense Factor - Small Group
Exhibit 8

Retention Category	Percent of Retention
Claims Processing	0.76%
Customer Service	1.60%
Taxes	2.87%
Capital Contribution	1.00%
Member Satisfaction Survey	0.17%
Member Communication Materials	0.41%
Open Enrollment	0.41%
Utilization Review	0.52%
Care Management	0.78%
Ad Hoc Reports	0.25%
Other - Community Service	0.30%
Corporate and Other Overhead	5.85%
Commissions	6.00%
Total	20.93%

Plan Adjusted Index Rates
Exhibit 9

Plans	Metallic Level	Name	Allowable Plan Modifiers					Plan Adjusted Index Rate
			Plan Design	Network Factor	Utilization Copay Effect	Non-EHB	Admin	
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	0.958	1.000	0.9250	1.0126	1.2646	446.61
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	0.893	1.000	0.9455	1.0126	1.2646	425.60
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	0.916	1.000	0.8990	1.0126	1.2646	415.07
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	0.866	1.000	0.9277	1.0126	1.2646	404.89
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	0.812	1.000	0.9046	1.0126	1.2646	369.95
6	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental	0.810	1.000	0.9073	1.0126	1.2646	370.46
7	Gold	KP DC Gold 1250/10/HSA/Dental/Ped Dental	0.810	1.000	0.9099	1.0126	1.2646	371.21
9	Silver	KP DC Silver 1250/35/Dental/Ped Dental	0.752	1.000	0.8831	1.0126	1.2646	334.50
10	Silver	KP DC Silver 2000/35/Dental/Ped Dental	0.717	1.000	0.8694	1.0126	1.2646	314.13
11	Silver	KP DC Silver 1500/30/20%/HSA/Dental/Ped Dental	0.722	1.000	0.8573	1.0126	1.2646	311.94
12	Silver	KP DC Silver 1500/30/10%/HSA/Dental/Ped Dental	0.741	1.000	0.8637	1.0126	1.2646	322.59
14	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	0.627	1.000	0.8027	1.0126	1.2646	253.60
15	Bronze	KP DC Bronze 2750/40/30%/HSA/Dental/Ped Dental	0.639	1.000	0.8211	1.0126	1.2646	264.55
16	Bronze	KP DC Bronze 3500/20%/HSA/Dental/Ped Dental	0.628	1.000	0.8114	1.0126	1.2646	256.77
17	Bronze	KP DC Bronze 4500/20/HSA/Dental/Ped Dental	0.605	1.000	0.7868	1.0126	1.2646	239.79
18	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	0.688	1.000	0.8158	1.0126	1.2646	282.67
19	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	0.816	1.000	0.8727	1.0126	1.2646	358.72
20	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	0.928	1.000	0.9169	1.0126	1.2646	428.71
21	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	0.958	1.050	0.9250	1.0126	1.2646	468.94
22	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	0.893	1.050	0.9455	1.0126	1.2646	446.88
23	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	0.916	1.050	0.8990	1.0126	1.2646	435.82
24	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	0.866	1.050	0.9277	1.0126	1.2646	425.13
25	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	0.812	1.050	0.9046	1.0126	1.2646	388.44
26	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel	0.810	1.050	0.9073	1.0126	1.2646	388.98

AV Calculator Values
Exhibit 10

Plans	Metallic Level	Name	AV Value
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	0.904
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	0.885
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	0.818
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	0.816
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	0.783
6	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental	0.781
7	Gold	KP DC Gold 1250/10/HSA/Dental/Ped Dental	0.809
9	Silver	KP DC Silver 1250/35/Dental/Ped Dental	0.716
10	Silver	KP DC Silver 2000/35/Dental/Ped Dental	0.699
11	Silver	KP DC Silver 1500/30/20%/HSA/Dental/Ped Dental	0.685
12	Silver	KP DC Silver 1500/30/10%/HSA/Dental/Ped Dental	0.696
14	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	0.616
15	Bronze	KP DC Bronze 2750/40/30%/HSA/Dental/Ped Dental	0.620
16	Bronze	KP DC Bronze 3500/20%/HSA/Dental/Ped Dental	0.609
17	Bronze	KP DC Bronze 4500/20/HSA/Dental/Ped Dental	0.593
18	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	0.616
19	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	0.699
20	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	0.783
21	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	0.904
22	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	0.885
23	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	0.818
24	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	0.816
25	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	0.783
26	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel	0.781

Quarterly Rate Factors
Exhibit 11

Plans	Metallic Level	Name	2Q 2014	3 Q 2014	4 Q 2014
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	1.009	1.017	1.026
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	1.009	1.017	1.026
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	1.009	1.017	1.026
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	1.009	1.017	1.026
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	1.009	1.017	1.026
6	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental	1.009	1.017	1.026
7	Gold	KP DC Gold 1250/10/HSA/Dental/Ped Dental	1.009	1.017	1.026
9	Silver	KP DC Silver 1250/35/Dental/Ped Dental	1.009	1.017	1.026
10	Silver	KP DC Silver 2000/35/Dental/Ped Dental	1.009	1.017	1.026
11	Silver	KP DC Silver 1500/30/20%/HSA/Dental/Ped Dental	1.009	1.017	1.026
12	Silver	KP DC Silver 1500/30/10%/HSA/Dental/Ped Dental	1.009	1.017	1.026
14	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	1.009	1.017	1.026
15	Bronze	KP DC Bronze 2750/40/30%/HSA/Dental/Ped Dental	1.009	1.017	1.026
16	Bronze	KP DC Bronze 3500/20%/HSA/Dental/Ped Dental	1.009	1.017	1.026
17	Bronze	KP DC Bronze 4500/20/HSA/Dental/Ped Dental	1.009	1.017	1.026
18	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	1.009	1.017	1.026
19	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	1.009	1.017	1.026
20	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	1.009	1.017	1.026
21	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
22	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
23	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
24	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
25	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	1.009	1.017	1.026
26	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel	1.009	1.017	1.026

Age Calibration Factor
Exhibit 12

	<u>Weighted Average Age</u>	<u>Age Factor</u>
Average Age in the Projection Period	42.6	1.077
Nearest Rounded Age	43.0	1.094
Calibration Factor		1.016

Age Factors
Exhibit 13

Age	Age Slope	Age Factor Indexed to Age 21
20	0.654	0.90
21	0.727	1.00
22	0.727	1.00
23	0.727	1.00
24	0.727	1.00
25	0.727	1.00
26	0.727	1.00
27	0.727	1.00
28	0.744	1.02
29	0.76	1.05
30	0.779	1.07
31	0.799	1.10
32	0.817	1.12
33	0.836	1.15
34	0.856	1.18
35	0.876	1.20
36	0.896	1.23
37	0.916	1.26
38	0.927	1.28
39	0.938	1.29
40	0.975	1.34
41	1.013	1.39
42	1.053	1.45
43	1.094	1.50
44	1.137	1.56
45	1.181	1.62
46	1.227	1.69
47	1.275	1.75
48	1.325	1.82
49	1.377	1.89
50	1.431	1.97
51	1.487	2.05
52	1.545	2.13
53	1.605	2.21
54	1.668	2.29
55	1.733	2.38
56	1.801	2.48
57	1.871	2.57
58	1.944	2.67
59	2.02	2.78
60	2.099	2.89
61	2.181	3.00
62	2.181	3.00
63	2.181	3.00
64+	2.181	3.00

Pediatric Dental Factor Development
Exhibit 14

Current Pool	Current Plan	Member Months	Ped Dental Factor
Individual	All	12,279	1.007
Small Group	All	34,212	1.013
Grand Total		46,491	1.011

	40 Yr Old Silver Without Load	40 Yr Old Silver With Load	Ped Dental PMPM
Individual	250.61	253.48	1.79
Small Group	281.29	284.49	3.59
Grand Total	273.18	276.30	3.11

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective January 1, 2014
District of Columbia Small Group Exchange
Appendix I-A

[illegible]

Rates effective January 1, 2014
District of Columbia Small Group Exchange
Appendix I-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$284.87	\$271.46	\$264.75	\$258.25	\$235.97	\$236.29
21	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
22	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
23	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
24	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
25	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
26	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
27	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
28	\$324.07	\$308.82	\$301.18	\$293.79	\$268.44	\$268.81
29	\$331.04	\$315.46	\$307.66	\$300.11	\$274.21	\$274.59
30	\$339.31	\$323.35	\$315.35	\$307.61	\$281.07	\$281.46
31	\$348.02	\$331.65	\$323.44	\$315.51	\$288.28	\$288.68
32	\$355.86	\$339.12	\$330.73	\$322.62	\$294.78	\$295.19
33	\$364.14	\$347.01	\$338.42	\$330.12	\$301.63	\$302.05
34	\$372.85	\$355.31	\$346.52	\$338.02	\$308.85	\$309.28
35	\$381.56	\$363.61	\$354.61	\$345.92	\$316.06	\$316.50
36	\$390.28	\$371.91	\$362.71	\$353.81	\$323.28	\$323.73
37	\$398.99	\$380.21	\$370.81	\$361.71	\$330.50	\$330.96
38	\$403.78	\$384.78	\$375.26	\$366.06	\$334.47	\$334.93
39	\$408.57	\$389.35	\$379.71	\$370.40	\$338.43	\$338.90
40	\$424.69	\$404.70	\$394.69	\$385.01	\$351.78	\$352.27
41	\$441.24	\$420.48	\$410.07	\$400.02	\$365.49	\$366.00
42	\$458.66	\$437.08	\$426.27	\$415.81	\$379.93	\$380.45
43	\$476.52	\$454.10	\$442.86	\$432.00	\$394.72	\$395.27
44	\$495.25	\$471.95	\$460.27	\$448.98	\$410.23	\$410.80
45	\$514.41	\$490.21	\$478.08	\$466.36	\$426.11	\$426.70
46	\$534.45	\$509.30	\$496.70	\$484.52	\$442.71	\$443.32
47	\$555.36	\$529.23	\$516.13	\$503.47	\$460.03	\$460.66
48	\$577.14	\$549.98	\$536.37	\$523.22	\$478.07	\$478.73
49	\$599.79	\$571.57	\$557.42	\$543.75	\$496.83	\$497.52
50	\$623.31	\$593.98	\$579.28	\$565.08	\$516.31	\$517.03
51	\$647.70	\$617.22	\$601.95	\$587.19	\$536.52	\$537.26
52	\$672.96	\$641.30	\$625.43	\$610.09	\$557.44	\$558.22
53	\$699.10	\$666.20	\$649.72	\$633.79	\$579.09	\$579.90
54	\$726.54	\$692.35	\$675.22	\$658.66	\$601.82	\$602.66
55	\$754.85	\$719.33	\$701.54	\$684.33	\$625.27	\$626.14
56	\$784.47	\$747.56	\$729.06	\$711.18	\$649.81	\$650.71
57	\$814.96	\$776.62	\$757.40	\$738.82	\$675.06	\$676.00
58	\$846.76	\$806.92	\$786.95	\$767.65	\$701.40	\$702.38
59	\$879.86	\$838.46	\$817.72	\$797.66	\$728.82	\$729.84
60	\$914.27	\$871.25	\$849.70	\$828.86	\$757.33	\$758.38
61	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01
62	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01
63	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01
64+	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective April 1, 2014
District of Columbia Small Group Exchange

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold	
Year	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	100% Demand/Pol Demand	
20 Under	\$273.64	\$260.77	\$254.32	\$248.08	\$241.97	\$235.99	\$227.44	\$204.95	\$192.47	\$191.13	\$197.66	\$195.38	\$162.09	\$157.33	\$146.92	\$173.19	\$172.99	\$262.68		
21	\$304.19	\$289.88	\$282.70	\$275.77	\$271.97	\$265.92	\$257.43	\$232.83	\$219.47	\$218.13	\$219.72	\$217.73	\$180.19	\$174.89	\$163.32	\$192.53	\$244.33	\$292.00		
22	\$304.19	\$289.88	\$282.70	\$275.77	\$271.97	\$265.92	\$257.43	\$232.83	\$219.47	\$218.13	\$219.72	\$217.73	\$180.19	\$174.89	\$163.32	\$192.53	\$244.33	\$292.00		
23	\$304.19	\$289.88	\$282.70	\$275.77	\$271.97	\$265.92	\$257.43	\$232.83	\$219.47	\$218.13	\$219.72	\$217.73	\$180.19	\$174.89	\$163.32	\$192.53	\$244.33	\$292.00		
24	\$304.19	\$289.88	\$282.70	\$275.77	\$271.97	\$265.92	\$257.43	\$232.83	\$219.47	\$218.13	\$219.72	\$217.73	\$180.19	\$174.89	\$163.32	\$192.53	\$244.33	\$292.00		
25	\$304.19	\$289.88	\$282.70	\$275.77	\$271.97	\$265.92	\$257.43	\$232.83	\$219.47	\$218.13	\$219.72	\$217.73	\$180.19	\$174.89	\$163.32	\$192.53	\$244.33	\$292.00		
26	\$304.19	\$289.88	\$282.70	\$275.77	\$271.97	\$265.92	\$257.43	\$232.83	\$219.47	\$218.13	\$219.72	\$217.73	\$180.19	\$174.89	\$163.32	\$192.53	\$244.33	\$292.00		
27	\$304.19	\$289.88	\$282.70	\$275.77	\$271.97	\$265.92	\$257.43	\$232.83	\$219.47	\$218.13	\$219.72	\$217.73	\$180.19	\$174.89	\$163.32	\$192.53	\$244.33	\$292.00		
28	\$311.30	\$296.65	\$289.31	\$282.22	\$275.86	\$268.22	\$258.74	\$233.16	\$218.96	\$217.43	\$224.86	\$216.77	\$184.40	\$178.98	\$167.14	\$207.03	\$250.04	\$298.82		
29	\$318.00	\$303.03	\$295.54	\$286.31	\$276.41	\$266.78	\$256.17	\$230.17	\$212.61	\$211.11	\$220.69	\$210.57	\$180.37	\$172.83	\$160.74	\$201.27	\$245.42	\$293.85		
30	\$325.95	\$310.61	\$302.92	\$295.50	\$286.99	\$279.37	\$270.91	\$244.13	\$229.26	\$227.66	\$235.44	\$225.07	\$185.08	\$179.03	\$167.40	\$215.00	\$260.30	\$312.88		
31	\$334.58	\$310.70	\$303.58	\$296.13	\$288.03	\$280.43	\$273.31	\$246.58	\$231.47	\$229.40	\$238.43	\$227.47	\$190.43	\$184.29	\$172.59	\$219.51	\$264.87	\$320.91		
32	\$341.85	\$317.92	\$310.72	\$303.91	\$296.17	\$288.13	\$280.56	\$254.04	\$238.76	\$236.62	\$246.92	\$235.91	\$194.18	\$187.95	\$176.25	\$223.59	\$268.77	\$328.14		
33	\$349.80	\$333.34	\$325.09	\$317.12	\$308.75	\$300.15	\$292.45	\$265.77	\$250.41	\$248.03	\$258.36	\$247.32	\$198.63	\$192.30	\$180.61	\$227.91	\$272.69	\$335.78		
34	\$358.16	\$341.31	\$332.87	\$324.70	\$316.28	\$307.69	\$299.09	\$272.46	\$257.09	\$254.62	\$264.92	\$253.87	\$203.38	\$197.06	\$185.37	\$232.16	\$276.99	\$343.81		
35	\$366.29	\$349.63	\$340.64	\$332.29	\$323.64	\$314.90	\$306.04	\$279.43	\$264.07	\$261.55	\$271.89	\$260.85	\$210.72	\$204.40	\$192.71	\$239.29	\$284.07	\$351.86		
36	\$374.90	\$357.26	\$348.42	\$339.88	\$331.05	\$321.98	\$313.60	\$286.79	\$271.39	\$268.85	\$279.80	\$268.73	\$218.88	\$212.57	\$200.29	\$237.28	\$301.12	\$359.87		
37	\$383.27	\$356.20	\$347.46	\$338.56	\$329.67	\$320.58	\$312.92	\$287.06	\$269.58	\$267.04	\$278.64	\$267.58	\$220.36	\$214.05	\$201.78	\$242.58	\$307.85	\$367.91		
38	\$387.87	\$369.62	\$360.48	\$351.64	\$342.29	\$333.74	\$324.99	\$292.39	\$272.82	\$270.91	\$282.67	\$271.61	\$220.25	\$213.96	\$201.69	\$245.49	\$311.54	\$372.32		
39	\$392.47	\$374.01	\$364.75	\$355.81	\$346.95	\$338.18	\$329.42	\$300.58	\$279.65	\$278.12	\$290.41	\$279.25	\$226.42	\$219.16	\$206.89	\$250.25	\$316.74	\$376.74		
40	\$407.96	\$388.76	\$379.14	\$369.84	\$360.93	\$352.93	\$343.99	\$312.99	\$292.84	\$290.94	\$303.64	\$292.48	\$231.65	\$224.45	\$212.04	\$258.20	\$327.67	\$391.60		
41	\$423.86	\$403.91	\$393.92	\$384.26	\$375.10	\$365.98	\$356.82	\$325.29	\$304.46	\$302.66	\$315.38	\$304.26	\$240.68	\$233.07	\$220.77	\$263.45	\$330.45	\$406.87		
42	\$440.59	\$419.86	\$409.47	\$399.63	\$390.44	\$381.26	\$372.07	\$336.20	\$315.00	\$313.25	\$325.85	\$314.69	\$250.18	\$242.56	\$230.27	\$274.86	\$343.89	\$422.93		
43	\$457.75	\$436.21	\$425.42	\$414.98	\$405.61	\$396.24	\$386.87	\$350.78	\$329.17	\$327.31	\$340.64	\$329.47	\$259.92	\$252.31	\$239.72	\$287.67	\$349.40	\$439.40		
44	\$475.74	\$453.36	\$442.14	\$431.29	\$421.92	\$412.55	\$403.18	\$367.42	\$345.31	\$343.64	\$356.93	\$345.76	\$270.14	\$262.51	\$250.01	\$297.52	\$358.12	\$446.67		
45	\$494.15	\$470.90	\$459.25	\$447.98	\$436.62	\$425.26	\$413.90	\$378.49	\$356.09	\$354.32	\$367.61	\$356.35	\$280.59	\$272.71	\$260.18	\$307.63	\$370.44	\$454.34		
46	\$513.40	\$489.24	\$477.14	\$465.43	\$453.27	\$441.10	\$428.94	\$394.42	\$371.61	\$369.84	\$383.11	\$371.85	\$291.52	\$283.41	\$270.87	\$317.45	\$386.44	\$462.82		
47	\$533.48	\$508.38	\$495.80	\$483.64	\$471.49	\$459.34	\$447.18	\$412.40	\$389.57	\$387.63	\$400.83	\$389.57	\$306.43	\$298.23	\$285.74	\$332.65	\$401.58	\$482.22		
48	\$554.40	\$528.32	\$515.24	\$502.61	\$489.87	\$477.12	\$464.40	\$428.76	\$405.85	\$403.99	\$417.17	\$405.85	\$313.41	\$305.11	\$292.66	\$344.44	\$413.77	\$492.82		
49	\$576.16	\$549.05	\$535.47	\$522.33	\$509.26	\$496.19	\$483.12	\$447.46	\$424.55	\$422.69	\$435.88	\$424.55	\$325.09	\$316.78	\$304.33	\$355.44	\$424.77	\$503.87		
50	\$598.75	\$570.88	\$556.46	\$542.82	\$528.97	\$515.12	\$501.27	\$465.56	\$442.65	\$440.80	\$453.99	\$442.65	\$336.61	\$328.30	\$315.85	\$366.66	\$436.92	\$525.75		
51	\$622.91	\$594.24	\$578.24	\$564.06	\$549.61	\$535.16	\$520.71	\$484.99	\$462.08	\$460.23	\$473.42	\$462.08	\$349.42	\$341.11	\$328.79	\$380.00	\$449.25	\$549.25		
52	\$646.45	\$616.04	\$600.79	\$586.06	\$571.38	\$556.73	\$542.05	\$506.28	\$483.37	\$481.52	\$494.71	\$483.37	\$362.09	\$353.78	\$341.43	\$392.66	\$461.92	\$573.25		
53	\$671.56	\$642.13	\$626.82	\$611.95	\$596.88	\$581.91	\$566.84	\$530.07	\$507.16	\$505.31	\$518.50	\$507.16	\$375.20	\$366.89	\$354.54	\$404.00	\$474.87	\$598.00		
54	\$697.92	\$668.08	\$652.72	\$637.72	\$622.72	\$607.72	\$592.72	\$555.92	\$533.01	\$531.16	\$544.35	\$533.01	\$388.40	\$379.09	\$366.74	\$415.00	\$485.00	\$603.00		
55	\$725.12	\$695.00	\$679.00	\$663.00	\$647.00	\$631.00	\$615.00	\$578.00	\$555.00	\$553.15	\$566.35	\$555.00	\$403.60	\$394.30	\$381.00	\$430.00	\$500.00	\$620.00		
56	\$753.57	\$718.11	\$702.34	\$686.57	\$670.80	\$655.03	\$639.26	\$602.49	\$579.72	\$577.87	\$591.07	\$579.72	\$416.00	\$406.70	\$393.40	\$443.00	\$513.00	\$633.00		
57	\$782.86	\$747.02	\$731.26	\$715.51	\$699.76	\$684.01	\$668.26	\$631.49	\$608.72	\$606.87	\$620.07	\$608.72	\$425.00	\$415.70	\$402.40	\$454.00	\$524.00	\$644.00		
58	\$813.40	\$775.13	\$759.35	\$743.57	\$727.80	\$712.02	\$696.24	\$659.47	\$636.70	\$634.85	\$648.05	\$636.70	\$434.00	\$424.70	\$411.40	\$463.00	\$533.00	\$653.00		
59	\$845.20	\$805.43	\$789.65	\$773.87	\$758.10	\$742.32	\$726.54	\$689.77	\$667.00	\$665.15	\$678.35	\$667.00	\$443.00	\$433.70	\$420.40	\$472.00	\$542.00	\$662.00		
60	\$878.26	\$838.93	\$823.15	\$807.37	\$791.59	\$775.81	\$759.99	\$723.22	\$700.45	\$698.60	\$711.80	\$700.45	\$452.00	\$442.70	\$429.40	\$481.00	\$551.00	\$671.00		
61	\$912.57	\$869.63	\$853.85	\$838.07	\$822.29	\$806.51	\$790.73	\$753.96	\$731.19	\$729.34	\$742.54	\$731.19	\$461.00	\$451.70	\$438.40	\$490.00	\$560.00	\$680.00		
62	\$912.57	\$869.63	\$853.85	\$838.07	\$822.29	\$806.51	\$790.73	\$753.96	\$731.19	\$729.34	\$742.54	\$731.19	\$461.00	\$451.70	\$438.40	\$490.00	\$560.00	\$680.00		
63	\$912.57	\$869.63	\$853.85	\$838.07	\$822.29	\$806.51	\$790.73	\$753.96	\$731.19	\$729.34	\$742.54	\$731.19	\$461.00	\$451.70	\$438.40	\$490.00	\$560.00	\$680.00		
64	\$912.57	\$869.63	\$853.85	\$838.07	\$822.29	\$806.51	\$790.73	\$753.96	\$731.19	\$729.34	\$742.54	\$731.19	\$461.00	\$451.70	\$438.40	\$490.00	\$560.00	\$680.00		

Rates effective April 1, 2014
District of Columbia Small Group Exchange
Appendix II-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$287.33	\$273.81	\$267.03	\$260.48	\$238.00	\$238.33
21	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
22	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
23	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
24	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
25	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
26	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
27	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
28	\$326.87	\$311.49	\$303.78	\$296.33	\$270.76	\$271.13
29	\$333.90	\$318.19	\$310.31	\$302.70	\$276.58	\$276.96
30	\$342.24	\$326.14	\$318.07	\$310.27	\$283.49	\$283.89
31	\$351.03	\$334.51	\$326.24	\$318.24	\$290.77	\$291.18
32	\$358.94	\$342.05	\$333.59	\$325.41	\$297.32	\$297.74
33	\$367.29	\$350.00	\$341.34	\$332.97	\$304.24	\$304.66
34	\$376.07	\$358.38	\$349.51	\$340.94	\$311.52	\$311.95
35	\$384.86	\$366.75	\$357.68	\$348.90	\$318.79	\$319.24
36	\$393.65	\$375.12	\$365.84	\$356.87	\$326.07	\$326.53
37	\$402.43	\$383.50	\$374.01	\$364.84	\$333.35	\$333.81
38	\$407.27	\$388.10	\$378.50	\$369.22	\$337.35	\$337.82
39	\$412.10	\$392.71	\$382.99	\$373.60	\$341.36	\$341.83
40	\$428.35	\$408.20	\$398.10	\$388.34	\$354.82	\$355.32
41	\$445.05	\$424.11	\$413.61	\$403.47	\$368.65	\$369.16
42	\$462.62	\$440.85	\$429.95	\$419.40	\$383.21	\$383.74
43	\$480.63	\$458.02	\$446.69	\$435.73	\$398.13	\$398.68
44	\$499.53	\$476.02	\$464.24	\$452.86	\$413.78	\$414.35
45	\$518.86	\$494.44	\$482.21	\$470.38	\$429.79	\$430.39
46	\$539.07	\$513.70	\$500.99	\$488.71	\$446.53	\$447.15
47	\$560.15	\$533.80	\$520.59	\$507.82	\$464.00	\$464.64
48	\$582.12	\$554.73	\$541.01	\$527.74	\$482.20	\$482.86
49	\$604.97	\$576.50	\$562.24	\$548.45	\$501.12	\$501.81
50	\$628.69	\$599.11	\$584.29	\$569.96	\$520.77	\$521.49
51	\$653.29	\$622.56	\$607.15	\$592.26	\$541.15	\$541.90
52	\$678.78	\$646.84	\$630.83	\$615.36	\$562.26	\$563.04
53	\$705.14	\$671.96	\$655.33	\$639.26	\$584.09	\$584.90
54	\$732.81	\$698.33	\$681.06	\$664.35	\$607.02	\$607.86
55	\$761.37	\$725.55	\$707.60	\$690.24	\$630.67	\$631.55
56	\$791.25	\$754.02	\$735.36	\$717.33	\$655.42	\$656.33
57	\$822.00	\$783.32	\$763.94	\$745.21	\$680.90	\$681.84
58	\$854.07	\$813.89	\$793.75	\$774.28	\$707.46	\$708.44
59	\$887.46	\$845.70	\$824.78	\$804.55	\$735.12	\$736.14
60	\$922.17	\$878.78	\$857.04	\$836.02	\$763.87	\$764.93
61	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81
62	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81
63	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81
64+	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective July 1, 2014
District of Columbia Small Group Exchange
Appendix III-A

	1	2	3	4	5	6	7	9	10	11	12	14	15	16	17	18	19	20
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	P DC Platinum 4000/Dental/Pol/Dent	P DC Platinum 4200/Dental/Pol/Dent	KP DC Gold 4200/Dental/Pol/Dental	DC Gold 4800/Dental/Pol/Dental	P DC Gold 4800/Dental/Pol/Dental	P DC Gold 4200/Dental/Pol/Dental	KP DC Gold 4200/Dental/Pol/Dental	P DC Silver 4200/Dental/Pol/Dental	P DC Silver 4800/Dental/Pol/Dental	DC Silver 4200/Dental/Pol/Dental	P DC Silver 4200/Dental/Pol/Dental	P DC Bronze 4200/Dental/Pol/Dental	P DC Bronze 4200/Dental/Pol/Dental	P DC Bronze 4200/Dental/Pol/Dental	P DC Bronze 4200/Dental/Pol/Dental	P DC Bronze 4200/Dental/Pol/Dental	P DC Silver 4200/Dental/Pol/Dental	KP DC Gold 4200/Dental/Pol/Dental
20 and Under	\$276.01	\$265.02	\$256.51	\$250.22	\$238.63	\$228.95	\$229.41	\$206.72	\$194.13	\$191.78	\$191.37	\$156.73	\$163.49	\$158.69	\$148.19	\$174.69	\$221.69	\$264.94
21	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
22	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
23	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
24	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
25	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
26	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
27	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
28	\$313.99	\$299.22	\$291.81	\$284.66	\$260.09	\$260.45	\$260.98	\$235.17	\$220.85	\$219.31	\$226.80	\$178.29	\$185.99	\$180.53	\$168.38	\$252.20	\$301.40	\$346.78
29	\$320.74	\$305.65	\$298.09	\$290.78	\$265.68	\$266.05	\$266.59	\$240.23	\$225.60	\$224.02	\$231.68	\$182.13	\$189.99	\$184.41	\$172.21	\$203.00	\$257.62	\$307.89
30	\$328.76	\$313.29	\$305.54	\$298.05	\$272.33	\$272.70	\$273.25	\$246.24	\$231.24	\$229.62	\$237.47	\$186.68	\$194.74	\$189.02	\$176.52	\$208.08	\$264.06	\$315.58
31	\$337.20	\$321.34	\$313.39	\$305.70	\$279.32	\$279.71	\$280.27	\$252.56	\$237.18	\$235.52	\$243.57	\$191.47	\$199.74	\$193.87	\$181.05	\$213.42	\$270.84	\$323.69
32	\$344.80	\$328.58	\$320.45	\$312.59	\$285.61	\$286.01	\$286.58	\$258.25	\$242.52	\$240.83	\$249.05	\$195.79	\$204.24	\$198.24	\$185.13	\$218.23	\$276.95	\$330.98
33	\$352.82	\$336.22	\$327.90	\$319.86	\$292.25	\$292.66	\$293.25	\$264.25	\$248.16	\$246.43	\$254.85	\$208.99	\$200.34	\$204.85	\$189.43	\$223.31	\$285.39	\$338.68
34	\$361.26	\$344.26	\$335.74	\$327.51	\$299.24	\$299.66	\$300.26	\$270.58	\$254.10	\$252.32	\$260.94	\$205.13	\$213.99	\$209.93	\$193.96	\$228.65	\$290.17	\$346.78
35	\$369.70	\$352.30	\$343.59	\$335.16	\$306.24	\$306.66	\$307.28	\$276.90	\$260.03	\$258.22	\$267.04	\$209.93	\$218.99	\$212.56	\$198.49	\$233.99	\$296.95	\$354.88
36	\$378.14	\$360.35	\$351.43	\$342.81	\$313.23	\$313.66	\$314.30	\$283.22	\$265.97	\$264.11	\$273.14	\$214.72	\$223.99	\$217.41	\$203.03	\$239.33	\$303.73	\$362.98
37	\$386.58	\$368.39	\$359.28	\$350.46	\$320.22	\$320.66	\$321.31	\$289.54	\$271.91	\$270.01	\$279.23	\$219.51	\$228.99	\$222.26	\$207.56	\$244.67	\$310.50	\$371.08
38	\$391.22	\$373.81	\$364.39	\$354.67	\$324.07	\$324.52	\$325.17	\$293.02	\$275.17	\$273.25	\$282.59	\$222.15	\$231.74	\$224.93	\$210.05	\$247.61	\$314.23	\$375.54
39	\$395.86	\$377.24	\$367.90	\$358.88	\$327.91	\$328.37	\$329.03	\$296.49	\$278.44	\$276.49	\$286.94	\$224.78	\$234.49	\$227.60	\$212.54	\$259.55	\$317.96	\$380.00
40	\$411.48	\$392.12	\$382.42	\$373.04	\$340.85	\$341.32	\$342.01	\$308.19	\$289.42	\$287.40	\$297.22	\$233.65	\$243.74	\$236.58	\$220.93	\$260.43	\$330.50	\$394.99
41	\$427.52	\$407.40	\$397.32	\$387.58	\$354.13	\$354.62	\$355.34	\$320.20	\$300.70	\$298.60	\$308.80	\$242.76	\$253.24	\$245.80	\$229.54	\$270.58	\$343.39	\$410.38
42	\$444.40	\$423.49	\$413.01	\$402.88	\$368.11	\$368.62	\$369.37	\$332.85	\$312.57	\$310.39	\$320.80	\$252.34	\$263.24	\$255.50	\$238.60	\$281.27	\$356.94	\$426.59
43	\$461.70	\$439.98	\$429.09	\$418.57	\$382.45	\$382.98	\$383.75	\$345.81	\$324.75	\$322.48	\$333.50	\$262.17	\$273.49	\$265.45	\$247.89	\$292.22	\$370.84	\$443.19
44	\$479.85	\$457.27	\$446.96	\$435.02	\$397.48	\$398.03	\$398.83	\$359.40	\$337.51	\$335.15	\$346.60	\$272.47	\$284.24	\$275.89	\$257.64	\$303.71	\$385.42	\$460.61
45	\$498.42	\$474.97	\$463.21	\$451.85	\$412.86	\$413.43	\$414.27	\$373.31	\$350.57	\$348.12	\$360.02	\$283.02	\$295.24	\$286.56	\$267.61	\$315.46	\$400.33	\$478.44
46	\$517.83	\$493.47	\$481.26	\$469.45	\$428.94	\$429.54	\$430.40	\$387.85	\$364.23	\$361.68	\$374.04	\$294.04	\$306.74	\$297.72	\$278.03	\$327.75	\$415.93	\$497.08
47	\$538.09	\$512.77	\$500.08	\$487.82	\$445.72	\$446.34	\$447.24	\$403.02	\$378.47	\$375.83	\$388.67	\$305.54	\$318.74	\$308.90	\$288.90	\$342.20	\$432.20	\$516.52
48	\$559.19	\$532.88	\$519.49	\$506.95	\$463.20	\$463.84	\$464.78	\$418.82	\$393.32	\$390.57	\$403.91	\$317.53	\$331.24	\$321.50	\$300.23	\$353.92	\$449.15	\$536.78
49	\$581.14	\$553.79	\$540.09	\$526.84	\$481.38	\$482.05	\$483.02	\$435.26	\$408.75	\$405.90	\$419.76	\$329.99	\$344.24	\$334.12	\$316.81	\$367.81	\$466.77	\$557.84
50	\$603.93	\$575.51	\$561.27	\$547.50	\$500.26	\$500.95	\$501.96	\$452.33	\$424.78	\$421.81	\$436.23	\$342.93	\$357.74	\$347.22	\$324.25	\$382.24	\$485.08	\$579.72
51	\$627.56	\$598.03	\$583.23	\$568.93	\$519.83	\$520.55	\$521.60	\$470.03	\$441.40	\$438.32	\$453.30	\$356.35	\$371.74	\$360.81	\$336.94	\$397.19	\$504.06	\$602.40
52	\$652.04	\$621.36	\$605.98	\$591.12	\$540.11	\$540.86	\$541.95	\$488.36	\$458.62	\$455.42	\$470.98	\$370.25	\$386.24	\$374.88	\$350.08	\$412.69	\$523.72	\$625.90
53	\$677.36	\$645.49	\$629.52	\$614.08	\$561.08	\$561.86	\$563.00	\$507.23	\$476.43	\$473.10	\$489.27	\$384.63	\$401.23	\$389.44	\$363.68	\$428.71	\$544.06	\$650.21
54	\$703.95	\$670.82	\$654.23	\$638.18	\$583.11	\$583.92	\$585.09	\$527.24	\$495.13	\$491.67	\$508.47	\$399.72	\$416.98	\$404.73	\$377.96	\$445.54	\$565.42	\$675.73
55	\$731.38	\$696.97	\$679.72	\$663.05	\$605.83	\$606.67	\$607.90	\$547.79	\$514.43	\$510.83	\$528.29	\$415.30	\$433.23	\$420.50	\$392.68	\$462.90	\$587.45	\$702.06
56	\$760.08	\$724.31	\$706.39	\$689.07	\$629.60	\$630.48	\$631.75	\$569.28	\$534.61	\$530.88	\$549.02	\$431.60	\$450.23	\$437.00	\$408.09	\$481.07	\$610.50	\$729.61
57	\$789.62	\$752.47	\$733.85	\$715.85	\$654.07	\$654.94	\$656.30	\$591.41	\$555.39	\$551.51	\$570.36	\$448.37	\$467.73	\$453.99	\$424.95	\$499.77	\$634.23	\$757.97
58	\$820.43	\$783.82	\$763.48	\$743.78	\$679.59	\$680.54	\$681.91	\$614.48	\$577.06	\$573.03	\$592.61	\$465.87	\$485.98	\$471.70	\$440.49	\$519.26	\$658.08	\$787.54
59	\$852.50	\$812.39	\$792.29	\$772.86	\$706.16	\$707.14	\$708.57	\$638.51	\$599.62	\$595.43	\$615.78	\$484.08	\$504.98	\$490.14	\$457.72	\$539.57	\$684.74	\$818.33
60	\$885.84	\$844.16	\$823.28	\$803.08	\$733.78	\$734.80	\$736.28	\$663.48	\$623.07	\$618.72	\$639.86	\$503.01	\$524.73	\$509.31	\$475.62	\$560.67	\$711.52	\$850.33
61	\$920.45	\$877.14	\$855.44	\$834.46	\$762.44	\$763.50	\$765.04	\$689.40	\$647.41	\$642.89	\$664.86	\$522.66	\$545.23	\$529.20	\$494.20	\$582.57	\$739.31	\$883.55
62	\$920.45	\$877.14	\$855.44	\$834.46	\$762.44	\$763.50	\$765.04	\$689.40	\$647.41	\$642.89	\$664.86	\$522.66	\$545.23	\$529.20	\$494.20	\$582.57	\$739.31	\$883.55
63	\$920.45	\$877.14	\$855.44	\$834.46	\$762.44	\$763.50	\$765.04	\$689.40	\$647.41	\$642.89	\$664.86	\$522.66	\$545.23	\$529.20	\$494.20	\$582.57	\$739.31	\$883.55
64+	\$920.45	\$877.14	\$855.44	\$834.46	\$762.44	\$763.50	\$765.04	\$689.40	\$647.41	\$642.89	\$664.86	\$522.66	\$545.23	\$529.20	\$494.20	\$582.57	\$739.31	\$883.55

Rates effective July 1, 2014
District of Columbia Small Group Exchange
Appendix III-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$289.81	\$276.17	\$269.34	\$262.73	\$240.06	\$240.39
21	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
22	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
23	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
24	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
25	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
26	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
27	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
28	\$329.69	\$314.18	\$306.40	\$298.89	\$273.10	\$273.47
29	\$336.78	\$320.93	\$312.99	\$305.32	\$278.97	\$279.36
30	\$345.20	\$328.96	\$320.82	\$312.95	\$285.94	\$286.34
31	\$354.06	\$337.40	\$329.06	\$320.98	\$293.28	\$293.69
32	\$362.04	\$345.00	\$336.47	\$328.22	\$299.89	\$300.31
33	\$370.46	\$353.03	\$344.29	\$335.85	\$306.87	\$307.29
34	\$379.32	\$361.47	\$352.53	\$343.88	\$314.21	\$314.64
35	\$388.18	\$369.92	\$360.77	\$351.92	\$321.55	\$321.99
36	\$397.05	\$378.36	\$369.00	\$359.95	\$328.89	\$329.35
37	\$405.91	\$386.81	\$377.24	\$367.99	\$336.23	\$336.70
38	\$410.78	\$391.46	\$381.77	\$372.41	\$340.27	\$340.74
39	\$415.66	\$396.10	\$386.30	\$376.83	\$344.31	\$344.78
40	\$432.05	\$411.72	\$401.54	\$391.69	\$357.89	\$358.38
41	\$448.89	\$427.77	\$417.19	\$406.96	\$371.84	\$372.35
42	\$466.62	\$444.66	\$433.66	\$423.02	\$386.52	\$387.06
43	\$484.79	\$461.98	\$450.55	\$439.50	\$401.57	\$402.13
44	\$503.84	\$480.13	\$468.25	\$456.77	\$417.35	\$417.93
45	\$523.34	\$498.71	\$486.38	\$474.45	\$433.50	\$434.10
46	\$543.72	\$518.14	\$505.32	\$492.93	\$450.39	\$451.01
47	\$564.99	\$538.41	\$525.09	\$512.21	\$468.01	\$468.66
48	\$587.15	\$559.52	\$545.68	\$532.30	\$486.36	\$487.04
49	\$610.19	\$581.48	\$567.09	\$553.19	\$505.45	\$506.15
50	\$634.12	\$604.29	\$589.33	\$574.88	\$525.27	\$526.00
51	\$658.94	\$627.93	\$612.40	\$597.38	\$545.82	\$546.58
52	\$684.64	\$652.43	\$636.28	\$620.68	\$567.11	\$567.90
53	\$711.23	\$677.76	\$660.99	\$644.78	\$589.14	\$589.96
54	\$739.14	\$704.37	\$686.94	\$670.09	\$612.26	\$613.11
55	\$767.95	\$731.81	\$713.71	\$696.20	\$636.12	\$637.01
56	\$798.08	\$760.53	\$741.71	\$723.52	\$661.08	\$662.00
57	\$829.10	\$790.09	\$770.54	\$751.64	\$686.78	\$687.73
58	\$861.45	\$820.92	\$800.60	\$780.97	\$713.57	\$714.56
59	\$895.13	\$853.01	\$831.90	\$811.50	\$741.47	\$742.50
60	\$930.13	\$886.37	\$864.44	\$843.24	\$770.47	\$771.54
61	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68
62	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68
63	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68
64+	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective October 1, 2014
District of Columbia Small Group Exchange
Appendix IV-A

	1	2	3	4	5	6	7	9	10	11	12	14	15	16	17	18	19	20
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	KP DC Platinum 2720(0.00%)Pct/Denial	KP DC Platinum 2800(0.00%)Pct/Denial	KP DC Gold 2500(0.00%)Pct/Denial	KP DC Gold 2600(0.00%)Pct/Denial	KP DC Gold 2700(0.00%)Pct/Denial	KP DC Gold 2800(0.00%)Pct/Denial	KP DC Gold 2900(0.00%)Pct/Denial	KP DC Silver 2500(0.00%)Pct/Denial	KP DC Silver 2600(0.00%)Pct/Denial	KP DC Silver 2700(0.00%)Pct/Denial	KP DC Silver 2800(0.00%)Pct/Denial	KP DC Bronze 2500(0.00%)Pct/Denial	KP DC Bronze 2600(0.00%)Pct/Denial	KP DC Bronze 2700(0.00%)Pct/Denial	KP DC Bronze 2800(0.00%)Pct/Denial	KP DC Bronze 2900(0.00%)Pct/Denial	KP DC Silver 2800(0.00%)Pct/Denial	KP DC Gold 1800(0.00%)Pct/Denial
20 and Under	\$278.39	\$265.29	\$258.73	\$252.38	\$238.60	\$230.92	\$231.39	\$308.51	\$195.81	\$194.44	\$201.09	\$158.08	\$164.91	\$160.06	\$149.47	\$176.20	\$223.61	\$267.23
21	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
22	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
23	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
24	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
25	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
26	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
27	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
28	\$316.70	\$301.80	\$294.33	\$287.12	\$262.34	\$262.70	\$263.23	\$237.20	\$222.76	\$221.20	\$228.76	\$179.83	\$182.09	\$182.09	\$170.04	\$200.45	\$254.38	\$304.01
29	\$323.51	\$308.29	\$300.66	\$293.29	\$267.98	\$268.35	\$268.89	\$242.31	\$227.55	\$225.96	\$233.68	\$183.70	\$191.63	\$186.00	\$173.70	\$204.76	\$259.85	\$310.55
30	\$331.60	\$316.00	\$308.18	\$300.62	\$274.68	\$275.06	\$275.61	\$248.36	\$233.24	\$231.61	\$239.52	\$188.29	\$196.42	\$190.65	\$178.04	\$209.88	\$266.35	\$318.31
31	\$340.11	\$324.11	\$316.09	\$308.34	\$281.73	\$282.12	\$282.69	\$254.74	\$239.23	\$237.55	\$245.67	\$193.13	\$201.47	\$195.55	\$182.61	\$215.27	\$273.18	\$326.48
32	\$347.78	\$331.41	\$323.21	\$315.29	\$288.08	\$288.48	\$289.06	\$260.48	\$244.61	\$242.91	\$251.21	\$197.48	\$206.01	\$199.05	\$186.72	\$220.12	\$279.34	\$333.84
33	\$355.86	\$339.12	\$330.73	\$322.62	\$294.78	\$295.19	\$295.78	\$266.54	\$250.30	\$248.55	\$257.05	\$202.07	\$210.80	\$204.60	\$191.07	\$225.23	\$285.83	\$341.60
34	\$364.38	\$347.23	\$338.64	\$330.34	\$301.83	\$302.25	\$302.86	\$272.91	\$256.29	\$254.50	\$263.20	\$206.91	\$215.84	\$209.50	\$195.64	\$230.62	\$292.67	\$349.77
35	\$372.89	\$355.35	\$346.55	\$338.06	\$309.31	\$309.93	\$309.93	\$279.29	\$262.28	\$260.45	\$269.35	\$211.74	\$220.88	\$214.39	\$200.21	\$236.01	\$299.51	\$357.95
36	\$381.41	\$363.46	\$354.47	\$345.77	\$316.37	\$317.01	\$317.01	\$286.67	\$269.27	\$267.50	\$276.39	\$216.57	\$225.93	\$219.29	\$204.78	\$241.40	\$306.35	\$366.12
37	\$389.92	\$371.57	\$362.38	\$353.49	\$323.99	\$324.43	\$324.43	\$292.04	\$274.26	\$272.34	\$281.65	\$221.41	\$230.97	\$224.18	\$209.35	\$246.79	\$313.19	\$374.29
38	\$394.60	\$376.03	\$366.73	\$357.74	\$326.86	\$327.32	\$327.32	\$295.55	\$277.55	\$275.61	\$285.03	\$224.07	\$233.74	\$226.87	\$209.75	\$249.75	\$316.95	\$378.78
39	\$399.28	\$380.50	\$371.08	\$361.98	\$330.74	\$331.20	\$331.87	\$299.06	\$280.84	\$278.88	\$288.41	\$226.73	\$236.52	\$229.57	\$214.38	\$252.71	\$320.71	\$383.28
40	\$415.03	\$395.51	\$385.72	\$376.26	\$344.27	\$344.96	\$344.96	\$310.85	\$291.92	\$289.88	\$299.79	\$235.67	\$245.85	\$238.62	\$222.84	\$262.68	\$333.36	\$398.40
41	\$431.21	\$410.92	\$400.75	\$390.92	\$357.19	\$358.41	\$358.41	\$322.97	\$303.30	\$301.18	\$311.47	\$244.85	\$254.43	\$247.92	\$231.52	\$272.92	\$346.35	\$413.93
42	\$448.24	\$427.15	\$416.58	\$406.36	\$371.29	\$371.81	\$372.56	\$335.72	\$315.27	\$313.07	\$323.77	\$254.52	\$265.51	\$257.71	\$240.66	\$283.70	\$360.03	\$430.27
43	\$465.69	\$443.78	\$432.80	\$422.18	\$385.75	\$386.28	\$387.06	\$336.78	\$327.55	\$325.26	\$336.38	\$264.43	\$275.85	\$267.74	\$250.03	\$294.74	\$374.05	\$447.02
44	\$483.99	\$461.22	\$449.81	\$438.78	\$400.91	\$401.47	\$402.28	\$362.50	\$340.42	\$338.05	\$349.60	\$274.83	\$286.69	\$278.27	\$259.86	\$306.33	\$388.75	\$464.59
45	\$502.72	\$479.07	\$467.22	\$455.76	\$417.00	\$417.65	\$418.25	\$375.63	\$353.60	\$351.13	\$363.13	\$285.46	\$297.79	\$289.04	\$269.92	\$318.18	\$403.79	\$482.57
46	\$522.30	\$497.73	\$485.41	\$473.51	\$432.65	\$433.25	\$434.12	\$391.20	\$367.37	\$364.80	\$380.29	\$296.58	\$308.43	\$300.29	\$280.43	\$330.58	\$419.52	\$501.37
47	\$542.74	\$512.20	\$500.40	\$492.03	\$449.57	\$450.19	\$451.10	\$406.50	\$381.74	\$379.08	\$392.03	\$308.18	\$321.49	\$312.04	\$291.40	\$343.51	\$435.93	\$520.98
48	\$564.02	\$537.48	\$524.18	\$511.33	\$467.20	\$467.85	\$468.79	\$422.44	\$393.94	\$390.74	\$407.40	\$320.27	\$334.10	\$324.28	\$302.83	\$356.98	\$453.03	\$541.41
49	\$586.16	\$558.58	\$544.76	\$531.39	\$485.54	\$486.21	\$487.19	\$439.02	\$412.28	\$409.40	\$423.39	\$332.84	\$347.21	\$337.01	\$314.71	\$370.99	\$470.81	\$562.66
50	\$609.14	\$580.48	\$566.12	\$552.23	\$504.58	\$505.28	\$506.30	\$456.24	\$429.45	\$425.46	\$439.99	\$345.80	\$360.63	\$350.22	\$327.05	\$385.54	\$480.27	\$584.72
51	\$632.98	\$603.20	\$588.27	\$573.84	\$524.32	\$525.05	\$526.11	\$474.09	\$445.22	\$442.11	\$457.21	\$359.43	\$374.95	\$363.93	\$339.85	\$400.63	\$508.42	\$607.61
52	\$657.67	\$626.72	\$611.22	\$596.23	\$544.77	\$545.53	\$546.63	\$492.58	\$462.58	\$459.35	\$475.05	\$373.45	\$389.57	\$378.12	\$353.11	\$416.25	\$528.25	\$631.31
53	\$683.21	\$651.06	\$634.95	\$619.38	\$565.93	\$567.06	\$568.15	\$511.71	\$480.55	\$477.19	\$493.49	\$387.95	\$404.70	\$392.81	\$366.82	\$432.42	\$548.76	\$655.82
54	\$710.03	\$676.62	\$659.88	\$643.69	\$588.14	\$589.96	\$591.85	\$531.80	\$499.41	\$495.92	\$512.87	\$403.18	\$420.59	\$408.22	\$381.22	\$449.39	\$570.30	\$681.57
55	\$737.70	\$702.99	\$685.99	\$668.78	\$611.91	\$613.15	\$614.87	\$552.52	\$518.87	\$515.25	\$532.85	\$418.89	\$436.98	\$424.13	\$396.08	\$466.90	\$592.52	\$708.11
56	\$766.64	\$730.57	\$712.49	\$695.02	\$635.92	\$637.20	\$638.45	\$574.20	\$539.23	\$535.46	\$553.76	\$433.32	\$454.12	\$440.77	\$411.62	\$485.22	\$615.77	\$735.91
57	\$796.44	\$758.97	\$740.19	\$722.03	\$659.72	\$660.64	\$661.97	\$596.52	\$560.19	\$556.27	\$575.28	\$452.24	\$471.77	\$457.91	\$427.62	\$504.08	\$639.71	\$764.52
58	\$827.51	\$788.58	\$769.07	\$750.20	\$685.46	\$686.41	\$687.80	\$619.79	\$582.05	\$577.98	\$597.73	\$469.89	\$490.18	\$475.77	\$444.30	\$523.75	\$664.67	\$794.34
59	\$859.86	\$819.41	\$799.13	\$779.53	\$712.26	\$713.25	\$714.49	\$640.57	\$600.80	\$594.02	\$619.34	\$488.26	\$509.34	\$494.37	\$461.67	\$544.23	\$699.80	\$825.40
60	\$893.49	\$853.45	\$830.39	\$810.02	\$741.14	\$742.64	\$744.39	\$669.21	\$626.45	\$620.06	\$645.39	\$507.35	\$529.26	\$513.71	\$479.72	\$565.51	\$717.66	\$857.68
61	\$928.40	\$884.72	\$862.83	\$841.66	\$769.03	\$770.10	\$771.65	\$695.35	\$653.00	\$648.44	\$670.60	\$527.17	\$549.94	\$533.78	\$498.47	\$587.60	\$745.70	\$891.19
62	\$928.40	\$884.72	\$862.83	\$841.66	\$769.03	\$770.10	\$771.65	\$695.35	\$653.00	\$648.44	\$670.60	\$527.17	\$549.94	\$533.78	\$498.47	\$587.60	\$745.70	\$891.19
63	\$928.40	\$884.72	\$862.83	\$841.66	\$769.03	\$770.10	\$771.65	\$695.35	\$653.00	\$648.44	\$670.60	\$527.17	\$549.94	\$533.78	\$498.47	\$587.60	\$745.70	\$891.19
64+	\$928.40	\$884.72	\$862.83	\$841.66	\$769.03	\$770.10	\$771.65	\$695.35	\$653.00	\$648.44	\$670.60	\$527.17	\$549.94	\$533.78	\$498.47	\$587.60	\$745.70	\$891.19

Rates effective October 1, 2014
District of Columbia Small Group Exchange
Appendix IV-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$292.31	\$278.56	\$271.67	\$265.00	\$242.13	\$242.47
21	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
22	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
23	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
24	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
25	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
26	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
27	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
28	\$332.54	\$316.89	\$309.05	\$301.47	\$275.45	\$275.84
29	\$339.69	\$323.71	\$315.70	\$307.95	\$281.38	\$281.77
30	\$348.18	\$331.80	\$323.59	\$315.65	\$288.41	\$288.81
31	\$357.12	\$340.32	\$331.90	\$323.76	\$295.82	\$296.23
32	\$365.17	\$347.98	\$339.37	\$331.05	\$302.48	\$302.90
33	\$373.66	\$356.08	\$347.27	\$338.75	\$309.52	\$309.95
34	\$382.60	\$364.60	\$355.57	\$346.85	\$316.92	\$317.36
35	\$391.54	\$373.11	\$363.88	\$354.96	\$324.33	\$324.78
36	\$400.48	\$381.63	\$372.19	\$363.06	\$331.73	\$332.19
37	\$409.41	\$390.15	\$380.50	\$371.17	\$339.13	\$339.61
38	\$414.33	\$394.84	\$385.07	\$375.62	\$343.21	\$343.68
39	\$419.25	\$399.52	\$389.64	\$380.08	\$347.28	\$347.76
40	\$435.79	\$415.28	\$405.01	\$395.07	\$360.98	\$361.48
41	\$452.77	\$431.47	\$420.79	\$410.47	\$375.05	\$375.57
42	\$470.65	\$448.50	\$437.41	\$426.68	\$389.86	\$390.40
43	\$488.97	\$465.97	\$454.44	\$443.29	\$405.04	\$405.60
44	\$508.19	\$484.28	\$472.30	\$460.72	\$420.96	\$421.54
45	\$527.86	\$503.02	\$490.58	\$478.54	\$437.25	\$437.85
46	\$548.42	\$522.62	\$509.68	\$497.18	\$454.28	\$454.91
47	\$569.87	\$543.06	\$529.62	\$516.63	\$472.05	\$472.70
48	\$592.22	\$564.36	\$550.39	\$536.89	\$490.56	\$491.24
49	\$615.46	\$586.50	\$571.99	\$557.96	\$509.81	\$510.52
50	\$639.60	\$609.50	\$594.42	\$579.85	\$529.81	\$530.54
51	\$664.63	\$633.36	\$617.69	\$602.54	\$550.54	\$551.30
52	\$690.55	\$658.06	\$641.78	\$626.04	\$572.01	\$572.81
53	\$717.37	\$683.62	\$666.70	\$650.35	\$594.23	\$595.05
54	\$745.53	\$710.45	\$692.87	\$675.88	\$617.55	\$618.41
55	\$774.58	\$738.14	\$719.87	\$702.22	\$641.62	\$642.51
56	\$804.97	\$767.10	\$748.12	\$729.77	\$666.79	\$667.72
57	\$836.26	\$796.91	\$777.20	\$758.13	\$692.71	\$693.67
58	\$868.89	\$828.01	\$807.52	\$787.71	\$719.74	\$720.74
59	\$902.86	\$860.38	\$839.09	\$818.51	\$747.87	\$748.91
60	\$938.17	\$894.03	\$871.91	\$850.52	\$777.12	\$778.20
61	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60
62	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60
63	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60
64+	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

District of Columbia

2015 Small Group Rate Filing

HIOS Issuer ID 94506

HIOS Product ID 94506DC035, 94506DC036

Form Numbers DC-SG-HMO-FACE(01-14)HIX, DC-SG-POS-FACE(01-14)HIX, EOC-COVER (1-05), DC-SG-WRAP(01-14)HIX, KFHP-EOC COVER (01/10)DC, DCLG-ALL-TOC(1-05), DC-SG-SEC1(01-15)HIX, DC-SG-SEC2(01-15)HIX, DC-SG-SEC3(01-15)HIX, DC-SG-SEC4(01-14)HIX, DC-SG-SEC5(01-14)HIX, DC-SG-SEC6(01-15)HIX, DC-SG-SEC7(01-14)HIX, DC-SG-APPX-DEF(01-15)HIX, DC-SG-PLATINUM-0-20-DENTAL-HMO-COST(01-15)HIX, DC-SG-GOLD-0-20-DENTAL-HMO-COST(01-15)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-COST(01-15)HIX, DC-SG-GOLD-500-20-DENTAL-DHMO-COST(01-15)HIX, DC-SG-GOLD-1000-30-DENTALDHMO-COST(01-15)HIX, DC-SG-SILVER-1250-35-DENTALDHMO-COST(01-15)HIX, DC-SG-SILVER-2000-35-DENTALDHMO-COST(01-15)HIX, DC-SG-BRONZE-4500-50-DENTALDHMO-COST(01-15)HIX, DC-SG-GOLD-1250-10-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-GOLD-1250-0%-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-SILVER-1500-30-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-SILVER-1500-30-10%-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-BRONZE-3500-20%-HSADENTAL-HDHP-COST(01-15), DC-SG-BRONZE-4500-20-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-BRONZE-2750-40-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-BRONZE-4500-50-POSDENTAL-COST(01-15)HIX, DC-SG-GOLD-1000-30-POSDENTAL-COST(01-15)HIX, DC-SG-SILVER-2000-35-POSDENTAL-COST(01-15)HIX, DC-SG-PLATINUM-0-20-DENTALHMO-RX(01-15)HIX, DC-SG-GOLD-0-20-DENTAL-HMORX(01-15)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-RX(01-15)HIX, DC-SG-GOLD-500-20-DENTALDHMO-RX(01-15)HIX, DC-SG-GOLD-1000-30-DENTALDHMO-RX(01-15)HIX, DC-SG-SILVER-1250-35-DENTALDHMO-RX(01-15)HIX, DC-SG-SILVER-2000-35-DENTALDHMO-RX(01-15)HIX, DC-SG-BRONZE-4500-50-DENTALDHMO-RX(01-15)HIX, DC-SG-GOLD-1250-10-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-GOLD-1250-0%-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-SILVER-1500-30-10%-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-SILVER-1500-30-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-2750-40-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-3500-20%-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-4500-20-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-4500-50-POS-DENTAL-RX(01-15)HIX, DC-SG-GOLD-1000-30-POS-DENTAL-RX(01-15)HIX, DC-SG-SILVER-2000-35-POS-DENTAL-RX(01-15), DC-SG-DENTAL-ADULT(01-14)HIX, DC-SG-PED-DENTAL(01-15)HIX, DC-POS-AMEND(01-14)HIX

Actuarial Memorandum

I, Thomas Ahmann, Actuarial Director for Kaiser Foundation Health Plan, Inc. (Kaiser) am a member of the American Academy of Actuaries. I meet the qualification standards for certifying Regulatory Filings for Rates and Financial Projections for Health Plans. This Actuarial Certification applies to the attached filing for an approval of premium rates for Small Group sold on the exchange. This actuarial memorandum documents the assumptions and sources of data pertaining to the development of Kaiser premium rates effective January 2015. It is intended to comply with the requirements outlined in the DC Health Benefit Exchange Authority's *2015 Carrier Reference Manual* (March 2014, Version 1). It is not intended for any other purpose.

This rate filing applies to forms that are open to new sales and renewals. This filing does not cover grandfathered products that existed prior to March 23, 2010.

Kaiser Foundation Health Plan is an HMO company and offers traditional HMO copayment plans covering medical and pharmacy claims expenses. Kaiser also offers Deductible and High Deductible plans, some of which are HSA qualified and a limited number of Point of Service type plans. For purposes of regulation, these are all HMO products.

Kaiser Permanente will market products to the Individual and Small Group markets through Direct Sales channels and Broker arrangements, as well as on the District of Columbia Marketplace (aka the Exchange). The products are guaranteed issue and guaranteed renewable.

I am responsible for this filing. My telephone number is 510-271-6015 (Pacific time) and my email address is Thomas.M.Ahmann@kp.org.

Proposed Rate Increases

The percent increase in the Market Adjusted Index Rate from 2014 to 2015 is 8.4%. The drivers of that change are shown in the table below, which contains all the components of the Market Adjusted Index Rate calculation. The numbers shown are the ratio of the 2015 to the 2014 factor, so a 1.000 indicates no impact on the rate change.

Source of Change	2015/2014
Based Period Experience	1.059
Base Period Utilization Copay	1.002
Pricing Trend	0.999
Morbidity Adjustment	0.965
Risk Adjustment Recoveries	1.054
Pent Up Demand	1.000
Reinsurance Recoveries	1.000
Reinsurance Premium	0.995
Average Age Impact	0.996
Additional EHB	1.000
Exchange Fee	1.000
Fixed Cost Adjustment	1.014
Total Market Adjusted Index Rate Change	108.4%

Plan level rate changes are shown in row 25 of Worksheet II in the URRT. The biggest contributing factor to plan increases that vary from the Market Adjusted Index Rate change is a change in the methodology for determining the utilization copay effect in the projection period.

For 2015, Kaiser has changed its methodology to determine the utilization copay effect for its plans to better reflect the impact of member cost share. This year, along with copayments, we have considered the deductible levels as well. The result of this change impacts the plans with higher deductibles (i.e. Silver and Bronze) more than the plans with lower deductibles or just copayments (i.e. Platinum and Gold) so those plans show lower increases.

Experience Period Claims

Base period data:

The Revenue Requirement for 2015 for the new ACA plans is developed by accumulating Virginia-specific medical and administrative expenses for essential health benefits (EHB) for non-grandfathered business in the Child-Only, Conversion, Due Subsidy, Individually Medically Underwritten and Small Group lines of business incurred and paid in the period January 2013 through December 2013 including the incurred but not reported estimates for external expense. Allowed cost data from internal costs, fee for service claims, and prescription drug claims are trended to 2015. Allowed claims for internal services come directly from allocated costs while allowed claims for external expenses are calculated as incurred plus member cost sharing.

Capitations:

Kaiser Permanente has contracted with a dental provider to provide dental care to Kaiser members. Kaiser pays the provider a fixed capitation of \$1.15 PMPM to cover adult preventative. The \$1.15 PMPM is part of the base period allowed amount, shown in Exhibit 2. It is then removed as a non-Essential Health Benefit in Exhibit 3. Finally, this benefit is added back as part of the non-EHB adjustment in Exhibit 10.

Incurred Estimates on External Expense:

A common reserve tool developed and maintained by Kaiser Actuarial Services is used to set Kaiser's IBNR reserves. Kaiser's common reserve tool uses historical claim lag averages to project anticipated future payments. IBNR levels are set for line of business and service line breakouts. Note that the IBNR applies only to Kaiser's external allowed costs. Most of Kaiser's expenses are internal fixed costs, which are allocated and lag in reporting is immaterial.

The completion factors used to complete the base period external claims are taken from Kaiser's overall commercial line of business by type of service. The claims are incurred and paid in 2013 so a 12/12 completion factor is used.

Premium:

Premium was captured for calendar year 2013 for all members in the base period single (combined Small Group and Individual) pool. There were no MLR rebates for these members in this period. For Dues Subsidy members, the whole premium was captured and not just the portion paid by the member.

Part I Unified Rate Review Template

Base Period Experience:

The base period experience in Worksheet 1 Section I and in Worksheet 2 Section III is the combined experience of the Small Group and Individual markets. As required, members of Congress and their personal staffs may enroll in the exchange. No experience is included for that block of business. It is expected that the morbidity is similar to the small group pool as a whole. The Index Rate of the Experience Period in cell G17 is taken from Exhibit 1 line 3. It is the per member per month allowed claims less non-essential health benefits from the base period. Therefore, it represents the average age of the members in the risk pool. The Index Rate for the Projection period, discussed below, is taken from Exhibit 1 Line 16.

Benefit Categories:

The benefit categories in Section II of Worksheet I are mapped based on type of service and place of treatment codes. For example:

Benefit Category	Services
Inpatient Hospital	Inpatient Facility, Inpatient Visits (Rounding), Inpatient Surgery - Non Maternity, Maternity
Outpatient Hospital	Outpatient Facility, Emergency/Urgent Care, Hospital Outpatient Other Professional, Outpatient Surgery
Professional	Diagnostic Services, Office Visits, Cardiovascular, Chemotherapy/Pharmacy, Dialysis, PT/OT/ST
Other Medical	Other Services
Capitation	Adult Preventive Dental
Prescription Drug	Pharmacy

Morbidity and Other Adjustments:

The morbidity adjustment in Section II Worksheet I is developed from row (14) of Exhibit 1 and reflect the morbidity in the single risk pool (Small Group and Individual combined) of our expected 2015 membership as well as. The development of these factors along with the documentation of these assumptions is included in Exhibit 7.1-7.3.

The “Other” adjustment in Section II Worksheet I is an adjustment to reflect that family contracts are limited to three dependents in 2015.

Also included in the “Other” adjustment is the base period utilization copay effect from Exhibit 4. The adjustment is necessary to convert the base period experience from an average plan allowed amount to the allowed amount for the reference plan. “Other” also includes additional EHB benefits in the projection period.

All the factors discussed above in the Morbidity and Other Adjustments are based on Small Group and Individual experience combined.

Paid to Allowed Ratio:

The Paid to Allowed Average Factor in Projection Period in Section III of Worksheet I is an average plan factor for the plans listed in Worksheet II. It represents the change from the average benefit plan allowed amount to the average paid amount across the 2015 plans based on weightings in Worksheet 2 of the URRT.

The factor in cell v33 in Worksheet I of the URRT is calculated by weighting the plan design factors in Exhibit 10 by the projected members and allowed costs by plans in rows 81 and 100, respectively, of Worksheet II of the URRT.

Estimated Average Annual Premium per Policy:

The estimated average annual premium per policy based on the URRT and SERFF data included in the filing is \$8,184.76.

Risk Adjustment

Exhibit 7.1-7.3 documents the development of the Risk Adjustment index rate factor. The index rate is adjusted to reflect the expected change in morbidity of the members covered by these plans relative to the members in the base period data. It is also adjusted to reflect the risk adjustment receipts anticipated in the rating period based on the expect risk profile relative to the market of the Small Group line only based on DISB guidance.

Assumptions are documented regarding the current relative morbidity of Kaiser's population along with the expected morbidity of the future market relative to Kaiser. Growth assumptions for the market as a whole and Kaiser specifically are used to calculate Kaiser's 2015 expected relative morbidity to the market. This value is used to determine the expected risk adjustment impact to the market adjusted index rate.

Administrative Expense

Retention includes broker commissions, administrative expenses and capital contribution. Commissions are paid to Brokers of Record. The capital contribution is an amount to maintain and expand medical center facilities where members receive the majority of health care in the Kaiser Foundation Health Plan. As a group model HMO, Kaiser owns a significant portion of the health care delivery system. In other health care delivery models, capital contributions are included in fee for service payments, whereas for Kaiser these are funded through premium rates.

Quarterly Rate Factors

Exhibit 11 contains the quarterly rate factors that will be applied to base rates for 2nd, 3rd and 4th 2015 effective dates. These adjustments are based on an annual trend of 3.5%. Kaiser reserves the right to amend this filing with new quarterly factors based on emerging experience and other subsequent events.

In order for the Index Rate in the Projection Period in Wk1 Section III of the URRT to reflect the average quarterly rate, a weighted average trend adjustment based on the assumed distribution of renewals throughout the year has been development.

	Q1	Q2	Q3	Q4	Proj Index Adj for Small Group
Members	1,401	339	409	957	
Trend	3.5%	3.5%	3.5%	3.5%	
Months	24	27	30	33	
	1.072	1.082	1.091	1.101	1.013

Profit and Risk Margin

As mentioned above, the capital contribution of 1%, shown in Exhibit 9, is an amount to maintain and expand medical center facilities where members receive the majority of health care in the Kaiser Foundation Health Plan.

Taxes and Fees

Administrative expense has been adjusted to reflect the PCORI tax and the insurer tax that will apply in 2015. The amount is shown as percent in Exhibit 9.

Projected Loss Ratio

Based on a target admin percentage of 20.93%, which includes a 1% capital contribution margin, we anticipate an MLR based on federally prescribed methodology to be at least 81.07%. The MLR would be expected to be higher due to the required adjustments to both claims and premium in the prescribed methodology.

Market Adjusted Index Rate

The development of the index rate is summarized in Exhibit 1 and is based on combined experience of non-grandfathered Individual and Small Group experience as described above. The following factors along with Risk Adjustment described above have been considered in the development and are documented below.

Utilization copayment effect adjustment:

Allowed claims are grossed up for anticipated changes in the average utilization of services due to average cost sharing requirements in the base period. Member cost sharing results in lower utilization and, thus, lower allowed costs, than would otherwise occur in a zero cost share environment. An estimate based on industry standard factors has been made at the plan level to adjust our base period data to what would have been expected in a zero cost share environment in order to normalize for the utilization copayment effect. These adjustments are documented in Exhibit 4.

Demographic Adjustment:

The Demographic Adjustment shown in Exhibit 5 represents the expected change in the average member age from the base period to the projection period. Because of the lack of credible emerging experience as well as the uncertainty of the increasing mandate in 2015, we have assumed that the average age in the projection period is unchanged from the base period. However, due to slight difference in the average age between the Individual and Small group, there is a small change in the combined average age because of different growth in the Individual and Small Group members.

Embedded Pediatric Dental Adjustment:

Kaiser is embedding pediatric dental benefits into its 2015 plans. Kaiser will pay a dental provider a fixed per child per month capitation. Exhibit 14 shows the assumptions and development of the index rate adjustment factor to reflect the capitation on a per member per month basis by adjusting the index rate.

Trend:

The future trend numbers are based on actuarial judgment considering a mixture of expected industry trends, future fixed costs, and expected internalization of services. As an integrated health care provider, a large portion of Kaiser's expenses are the costs associated with providing medical care through our centers. Therefore, the projected cost that is included in our total revenue requirement is largely based on budgeting. For traditional carriers, projected claims trends are developed to project expected costs. However, given Kaiser's cost structure, Kaiser's projected claims trends fall out of the development of projected budgeted costs. For 2013 to 2015, our projected total internal annualized medical expense trend for Small Group is 3.5% and is shown in Exhibit 6 of our filing.

Alternative AV Calculations

The AV calculator does not have an option for outpatient facility copay. To calculate the impact on the actuarial value of the plan for this benefit we used the alternate method described in 156.135 (b)(2). Last year, Kaiser requested from a major actuarial consulting firm the national average allowed amount for outpatient facility costs in 2014. We have used this same data since HHS has not updated the data from last year's AV calculator. To determine AVs for plans outpatient facility copays, we propose an OP Copay Converter to be used with the AV calculator. To create this converter, we then compared the copay amount to the estimated average national OP facility allowed amount to calculate the implied coinsurance % for OP procedures. This coinsurance should only be applied to the OP facility cost and not the OP professional cost, which should be covered at 100%.

Plan designs have been changed to waive primary office visit copays for children younger than five. As the AV calculator does not have an adjustment to account for this benefit, we lowered the copay amount 16% by multiplying the actual copay by a factor of 0.84. For example, a \$20 primary office visit copay is entered as \$16.80. The 16% adjustment is based on Kaiser data (as a proxy for standard population). Primary care utilization was divided between children under five and all other members. The data showed 16% of primary care visits were attributed to children under five.

AV Pricing Values

The rates for specific plans are calculated by multiplying plan factors times the index rate. The plan factors use industry standard data in a model from a national actuarial consulting firm, calibrated to Kaiser experience to calculate the impact of the various cost share and plan elements for EHBs, including utilization copayment effect.

The reference plan used as the basis for the AV pricing values is a \$0 cost share plan valued using the same industry standard factors described above.

Exhibit 9 indicates the portion of the AV Pricing Value that is attributable to each of the allowable modifiers to the Index Rate. The plan factor shown in Exhibit 9 reflects both member cost shares and the resulting dampening of expected utilization due to those cost shares.

Network Adjustment

Kaiser provides services to its members in its Signature network in its medical offices and externally with contracted providers. Kaiser offers an expanded network of contracted non-Kaiser physicians in its Select network. Rates for products with the Select network are adjusted by a factor of 1.05 for HMO to reflect the additional cost. This adjustment is consistent with the factor already filed in prior filings. For the POS plans, the factor is 1.04, reflecting steerage of 80% for Tier 1.

Age Factors

The age factor table used to develop age specific rates is the standard table provided by DISB.

Exhibit 12 shows the development of the age calibration factor. This factor is new to the methodology in 2015. The development starts with the average age in the projection period from Exhibit 5. That age is rounded to the nearest age and the age factor is pulled from the DISB age curve. As described in the Actuarial Memorandum instructions, the ratio of the age factor for the nearest rounded age to the age factor for the average age in the projection period is the age calibration factor used in the rate development.

Non-EHB

An adjustment has been made to the base period allowed amount to remove the Non-EHB benefits from the Index Rate. This multiplier was calculated by summing the allowed amount for Non-EHB benefits in the base period and adding the adult preventive dental capitation and then dividing by total allowed.

Additional URRT Items

Membership Projections:

The total membership projection included across new plans in Section II of Worksheet 2 is consistent with Kaiser's business plan. Detailed assumptions are presented and documented in Exhibit 7.1-7.3.

An assumption is made in Worksheet 2 as to the distribution of members by product based on Kaiser's expected distribution of membership by metal level.

Terminated Plans:

The following non-grandfathered plans are included in the "Terminate Plans" column in Worksheet 2 of the URRT.

DC Added Choice POS Plan 1 (\$5/\$10)
DC Added Choice POS Plan 2 (\$15/\$25)
DC DHMO Plan 1 (\$10/\$20/\$250 Ded - 90%)
DC DHMO Plan 2 (\$15/\$25/\$500 Ded - 90%)
DC DHMO Plan 3 (\$25/\$35/\$2,000 Ded - 80%)
DC DHMO Plan 4 (\$25/\$35/\$1000 Ded - 80%)
DC Flex Choice Plan 1 (100/90/70 - \$10-\$20 OV)
DC Flex Choice Plan 2 (100/80/60 - \$15-\$25 OV)
DC Flex Choice Plan 3 (100/70/50 - \$25-\$35 OV)
DC Flex Choice Plan 4 (100/80/60 - \$10-\$25 OV)
DC HDHP Plan 1 (\$1,250 Ded - 80%)
DC HDHP Plan 2 (\$1,750 Ded - 70%)

DC HDHP Plan 3 (\$2,250 Ded – 70%)
 DC HDHP Plan 4 (\$1,250 Ded - 100%)
 DC HDHP Plan 5 (\$2,250 Ded - 100%)
 DC HDHP Plan 8 (\$2,800 Ded - 100%)
 DC HMO Plan 1 (\$5/\$10/\$0 IP/\$0 Rx Ded)
 DC HMO Plan 2 (\$10/\$20/\$0 IP/\$0 Rx Ded)
 DC HMO Plan 3 (\$15/\$25/\$0 IP/\$0 Rx Ded)
 DC HMO Plan 4 (\$15/\$30/\$500 IP/\$0 Rx Ded)
 DC HMO Plan 5 (\$20/\$30/\$250 IP/\$0 Rx Ded)
 DC HMO Plan 6 (\$20/\$40/20% IP/\$0 Rx Ded)
 DC HMO Plan 7 (\$10/\$10/\$250 IP/\$0 Rx Ded)
 DC HMO Plan 8 (\$20/\$20/\$500 IP/\$0 Rx Ded)

Warning Alert:

There are no warning alerts in Wk2 of the URRT

Summary Rate Calculation

Exhibit 1 shows the development of the Market Adjusted Index Rate from the base period Medical Cost Data. The Plan Adjusted Index Rates are calculated using the Market Adjusted Index Rate and the allowable plan adjustment factors in Exhibit 9. The final 2015 Consumer Adjusted Premium Rates are developed by applying the age slope and age calibration to the Plan Adjusted Index Rates to generate age specific rates.

Exhibit Table of Contents:

The following exhibits are included in this filing:

- Exhibit 1 – Market Adjusted Index Rate Calculation
- Exhibit 2 –Allowed Claims Development
- Exhibit 3 –Non-EHB Adjustments
- Exhibit 4 – Utilization Copayment Effect Adjustments
- Exhibit 5 – Demographic Adjustment
- Exhibit 6 – Trend Factor
- Exhibits 7.1 - Risk Adjustment and Morbidity Development – Combined Small and Individual
- Exhibits 7.2 - Risk Adjustment and Morbidity Development – Individual Line of Business
- Exhibits 7.3 - Risk Adjustment and Morbidity Development – Small Group Line of Business
- Exhibit 8 – Administrative Expense
- Exhibit 9 – Plan Adjusted Index Rates Development
- Exhibit 10 – AV Calculator Values
- Exhibit 11 – Quarterly Rate Factors
- Exhibit 12 – Age Calibration
- Exhibit 13 – Age Factors
- Exhibit 14 – Pediatric Dental Adjustment Factor
- Appendix I-A - 1st Quarter 2014 Signature Network Rate Sheet
- Appendix I-B - 1st Quarter 2014 Select Network Rate Sheet
- Appendix II-A - 2nd Quarter 2014 Signature Network Rate Sheet
- Appendix II-B - 2nd Quarter 2014 Select Network Rate Sheet
- Appendix III-A - 3rd Quarter 2014 Signature Network Rate Sheet
- Appendix III-B - 3rd Quarter 2014 Select Network Rate Sheet
- Appendix IV-A - 4th Quarter 2014 Signature Network Rate Sheet
- Appendix IV-B - 4th Quarter 2014 Select Network Rate Sheet

Certification

This filing is in conformity with all applicable Actuarial Standards of Practice, including ASOP No. 8. To the best of my knowledge, the rating methodologies of Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. and the development of the Index Rate comply with the applicable District and Federal Statutes and Regulations (45 CFR 156.80(d)(1)). The percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV were calculated in accordance with actuarial standards of practice. The index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates. The rating methodologies produce premiums that are reasonable in relation to benefits being provided and the populations being covered and are based on sound and commonly accepted actuarial principles and are neither excessive nor deficient.



Thomas Ahmann, FSA, MAAA
Actuarial Director
Kaiser Foundation Health Plan, Inc.
6/13/2014

**Index Rate Development
Summary Index Rate Calculation
Exhibit 1**

				<u>Source</u>
(1)	Base Period Allowed	\$333.14	Exhibit 2	
(2)	Non-EHB Claims Adjustment	0.9873	Exhibit 3	
(5)	Adjusted Base Period Allowed	\$328.92	(1) * (2)	
(6)	Base Period Utilization Adjustment	1.088	Exhibit 4	
(7)	Projection Period Utilization Adjustment	0.908		
(8)	Demographic Adjustment	0.996	Exhibit 5	
(9)	Product/Network Moribidty Adjustment	1.000	Exhibit 2	
(10)	Additional EHB (including Ped Dental)	1.01149	Exhibit 14	
(10)	Annualized Trend	3.5%	Exhibit 6	
(11)	Months of Trend	24		
(12)	Trend Factor	1.071	$\{1 + (10)\} ^ \{ (11) / 12 \}$	
(14)	Change in Morbidity	1.050	Exhibit 7	
(15)	Contract Limit of 3 Children Factor	1.005		
(16)	Combined Projection Period Index Rate Prior to Separate Modifiers	369.70	(5) * (6) * (7) * (8) * (9) * (10) * (12) * (13) * (14) * (15)	
(17)	Risk Adjustment	0.956	Exhibit 7	
(18)	Exchange fee	1.0000		
(19)	Reinsurance Premium	1.0104		
(20)	Market Adjusted Index Rate	\$357.14	(16) * (17) * (18) * (19)	

Allowed Claims Development
Exhibit 2

Current Pool	Current Plans	Member Months	Total
Individual	All	12,279	\$304.86
Small Group	All	34,212	\$343.29
Grand Total		46,491	\$333.14

Non-EHB Adjustments
Exhibit 3

Current Pool	Current Plans	Member Months	Non-EHB PMPM
Individual	All	12,279	\$4.06
Small Group	All	34,212	\$4.28
Grand Total		46,491	\$4.22

Multiplier to Remove Non-EHB [1 - (Non-EHB PMPM / Allowed PMPM)]	0.9873
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Utilization Copayment Effect Adjustment
Exhibit 4

Current Pool	Current Plan	Member Months	Allowed Amount	Copay Impact
Individual	All	12,279	\$304.86	0.897
Small Group	All	34,212	\$343.29	0.927
Grand Total		46,491	\$333.14	0.919

Adjustment Factor is the Inverse of the Total	1.088
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**Demographic Adjustment
Exhibit 5**

		Member Months	Average Age Factor ¹	Weighed Average Age ²
Experience Period	Individual	12279	1.0571	42.1
	Small Group	34212	1.0897	42.9
	Combined	46491	1.0811	42.7
Projection Period	Individual	24933	1.0571	42.1
	Small Group	37260	1.0897	42.9
	Combined	62193	1.0766	42.6
Demographic Factor			0.9959	

¹ Average age factor based on CMS Age curve

² Weighted Average Age = Interpolation on age curve of average age factor

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Exhibit 6
Trend Calculation

Category	Weight	2013 to 2015 Annualized Trend
Hospital	14.8%	4.5%
Physician Internal	22.8%	4.0%
Referral	3.6%	4.5%
Rx	15.4%	4.5%
Other	43.5%	2.5%
Composite	100.0%	3.5%

Risk Adjustment and Morbidity Development
Exhibit 7.1

Development of Risk Adjustment Factor Applied to Index Rate

	<u>Small</u>	<u>Individual</u>	<u>Total</u>
Average Members	3,105	2,078	5,183
Adjustment for change in risk in Kaiser membership	99.6%	113.0%	105.0%
Adjustment for risk adjustment recoveries	95.6%	92.2%	

Risk Adjustment and Morbidity Development
Exhibit 7.2

Current Risk Profile of Non-Grandfathered Kaiser members relative to current market

	<u>CY 2013 Member Months</u>	<u>Morbidity</u>
(1) Non-Grandfathered Guaranteed Issue	108	1.468
(2) Non-Grandfathered Medically Underwritten	11,667	0.977
(3) Dues Subsidy	504	1.115
(4) Total	12,279	0.987

Impact of projected membership to Kaiser risk profile in 2015 relative to current market

	<u>Member Months</u>	<u>Morbidity</u>
(5) Current Members [from (4) above]	12,279	0.987
(6) Gender to Unisex Selection Adjustment	11,667	1.100
(7) Total Morbidity Change	12,279	1.081
(8) New Entrants previously uninsured	6,327	1.300
(9) Transfers from other carriers or other KP Segments	6,327	1.000
(10) Subtotal	24,933	1.116

Impact to Current Market from all new entrants in 2015

	<u>Member Months</u>	<u>Risk Relativity</u>
(11) Current Market	211,205	1.000
(12) Uninsured New Entrants	25,246	1.300
(13) Transfers from Group	25,246	1.000
(14) 2015 Market	261,697	1.029
(15) Kaiser risk relativity to 2015 market [(10) / (14)]		1.085
(16) Pent Up Demand Factor for New Entrants		1.000
(17) Adjustment for change in risk in Kaiser membership [(10) / (4)]		113.0%
(18) Adjustment for risk adjustment recoveries [1 / (15)]		92.2%
(19) Adjustment for Pent Up Demand [{ (8) mems * (16) + (5) mems + (9) mems } / (10) mems }]		100.0%

**Risk Adjustment Factor
Exhibit 7.3**

Current Risk Profile of Non-Grandfathered Kaiser members relative to current market

	<u>CY 2013 Member Months</u>	<u>Morbidity</u>
(1) Non-Grandfathered ¹	34,212	1.050

Impact of projected membership to Kaiser risk profile in 2015 relative to current market

	<u>Members Months</u>	<u>Morbidity</u>
(2) Current Members [from (4) above]	34,212	1.050
(3) New to Kaiser	3,048	1.000
(4) Subtotal	37,260	1.046

	<u>Member Months</u>	
(5) 2015 Market	568,490	1.000
(6) Kaiser risk relativity to 2015 market [(4) / (5)]		1.046

Development of Risk Adjustment Factor Applied to Index Rate

(7) Adjustment for change in risk in Kaiser membership [(4) / (1)]	99.6%
(8) Adjustment for risk adjustment recoveries [1 / (6)]	95.6%
(9) Total Adjustment [(7) * (8)]	95.2%

¹ Current Kaiser portfolio is expected to be 1.05 to market.

Administrative Expense Factor - Small Group
Exhibit 8

Retention Category	Percent of Retention
Claims Processing	0.76%
Customer Service	1.60%
Taxes	2.87%
Capital Contribution	1.00%
Member Satisfaction Survey	0.17%
Member Communication Materials	0.41%
Open Enrollment	0.41%
Utilization Review	0.52%
Care Management	0.78%
Ad Hoc Reports	0.25%
Other - Community Service	0.30%
Corporate and Other Overhead	5.85%
Commissions	6.00%
Total	20.93%

Plan Adjusted Index Rates
Exhibit 9

Plans	Metallic Level	Name	Allowable Plan Modifiers					Plan Adjusted Index Rate
			Plan Design	Network Factor	Utilization Copay Effect	Non-EHB	Admin	
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	0.958	1.000	0.9250	1.0126	1.2646	446.61
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	0.893	1.000	0.9455	1.0126	1.2646	425.60
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	0.916	1.000	0.8990	1.0126	1.2646	415.07
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	0.866	1.000	0.9277	1.0126	1.2646	404.89
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	0.812	1.000	0.9046	1.0126	1.2646	369.95
6	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental	0.810	1.000	0.9073	1.0126	1.2646	370.46
7	Gold	KP DC Gold 1250/10/HSA/Dental/Ped Dental	0.810	1.000	0.9099	1.0126	1.2646	371.21
9	Silver	KP DC Silver 1250/35/Dental/Ped Dental	0.752	1.000	0.8831	1.0126	1.2646	334.50
10	Silver	KP DC Silver 2000/35/Dental/Ped Dental	0.717	1.000	0.8694	1.0126	1.2646	314.13
11	Silver	KP DC Silver 1500/30/20%/HSA/Dental/Ped Dental	0.722	1.000	0.8573	1.0126	1.2646	311.94
12	Silver	KP DC Silver 1500/30/10%/HSA/Dental/Ped Dental	0.741	1.000	0.8637	1.0126	1.2646	322.59
14	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	0.627	1.000	0.8027	1.0126	1.2646	253.60
15	Bronze	KP DC Bronze 2750/40/30%/HSA/Dental/Ped Dental	0.639	1.000	0.8211	1.0126	1.2646	264.55
16	Bronze	KP DC Bronze 3500/20%/HSA/Dental/Ped Dental	0.628	1.000	0.8114	1.0126	1.2646	256.77
17	Bronze	KP DC Bronze 4500/20/HSA/Dental/Ped Dental	0.605	1.000	0.7868	1.0126	1.2646	239.79
18	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	0.688	1.000	0.8158	1.0126	1.2646	282.67
19	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	0.816	1.000	0.8727	1.0126	1.2646	358.72
20	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	0.928	1.000	0.9169	1.0126	1.2646	428.71
21	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	0.958	1.050	0.9250	1.0126	1.2646	468.94
22	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	0.893	1.050	0.9455	1.0126	1.2646	446.88
23	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	0.916	1.050	0.8990	1.0126	1.2646	435.82
24	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	0.866	1.050	0.9277	1.0126	1.2646	425.13
25	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	0.812	1.050	0.9046	1.0126	1.2646	388.44
26	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel	0.810	1.050	0.9073	1.0126	1.2646	388.98

AV Calculator Values
Exhibit 10

Plans	Metallic Level	Name	AV Value
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	0.904
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	0.885
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	0.818
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	0.816
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	0.783
6	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental	0.781
7	Gold	KP DC Gold 1250/10/HSA/Dental/Ped Dental	0.809
9	Silver	KP DC Silver 1250/35/Dental/Ped Dental	0.716
10	Silver	KP DC Silver 2000/35/Dental/Ped Dental	0.699
11	Silver	KP DC Silver 1500/30/20%/HSA/Dental/Ped Dental	0.685
12	Silver	KP DC Silver 1500/30/10%/HSA/Dental/Ped Dental	0.696
14	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	0.616
15	Bronze	KP DC Bronze 2750/40/30%/HSA/Dental/Ped Dental	0.620
16	Bronze	KP DC Bronze 3500/20%/HSA/Dental/Ped Dental	0.609
17	Bronze	KP DC Bronze 4500/20/HSA/Dental/Ped Dental	0.593
18	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	0.616
19	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	0.699
20	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	0.783
21	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	0.904
22	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	0.885
23	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	0.818
24	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	0.816
25	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	0.783
26	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel	0.781

Quarterly Rate Factors
Exhibit 11

Plans	Metallic Level	Name	2Q 2014	3 Q 2014	4 Q 2014
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	1.009	1.017	1.026
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	1.009	1.017	1.026
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	1.009	1.017	1.026
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	1.009	1.017	1.026
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	1.009	1.017	1.026
6	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental	1.009	1.017	1.026
7	Gold	KP DC Gold 1250/10/HSA/Dental/Ped Dental	1.009	1.017	1.026
9	Silver	KP DC Silver 1250/35/Dental/Ped Dental	1.009	1.017	1.026
10	Silver	KP DC Silver 2000/35/Dental/Ped Dental	1.009	1.017	1.026
11	Silver	KP DC Silver 1500/30/20%/HSA/Dental/Ped Dental	1.009	1.017	1.026
12	Silver	KP DC Silver 1500/30/10%/HSA/Dental/Ped Dental	1.009	1.017	1.026
14	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	1.009	1.017	1.026
15	Bronze	KP DC Bronze 2750/40/30%/HSA/Dental/Ped Dental	1.009	1.017	1.026
16	Bronze	KP DC Bronze 3500/20%/HSA/Dental/Ped Dental	1.009	1.017	1.026
17	Bronze	KP DC Bronze 4500/20/HSA/Dental/Ped Dental	1.009	1.017	1.026
18	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	1.009	1.017	1.026
19	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	1.009	1.017	1.026
20	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	1.009	1.017	1.026
21	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
22	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
23	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
24	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
25	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	1.009	1.017	1.026
26	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel	1.009	1.017	1.026

Age Calibration Factor
Exhibit 12

	<u>Weighted Average Age</u>	<u>Age Factor</u>
Average Age in the Projection Period	42.6	1.077
Nearest Rounded Age	43.0	1.094
Calibration Factor		1.016

Age Factors
Exhibit 13

Age	Age Slope	Age Factor Indexed to Age 21
20	0.654	0.90
21	0.727	1.00
22	0.727	1.00
23	0.727	1.00
24	0.727	1.00
25	0.727	1.00
26	0.727	1.00
27	0.727	1.00
28	0.744	1.02
29	0.76	1.05
30	0.779	1.07
31	0.799	1.10
32	0.817	1.12
33	0.836	1.15
34	0.856	1.18
35	0.876	1.20
36	0.896	1.23
37	0.916	1.26
38	0.927	1.28
39	0.938	1.29
40	0.975	1.34
41	1.013	1.39
42	1.053	1.45
43	1.094	1.50
44	1.137	1.56
45	1.181	1.62
46	1.227	1.69
47	1.275	1.75
48	1.325	1.82
49	1.377	1.89
50	1.431	1.97
51	1.487	2.05
52	1.545	2.13
53	1.605	2.21
54	1.668	2.29
55	1.733	2.38
56	1.801	2.48
57	1.871	2.57
58	1.944	2.67
59	2.02	2.78
60	2.099	2.89
61	2.181	3.00
62	2.181	3.00
63	2.181	3.00
64+	2.181	3.00

Pediatric Dental Factor Development
Exhibit 14

Current Pool	Current Plan	Member Months	Ped Dental Factor
Individual	All	12,279	1.007
Small Group	All	34,212	1.013
Grand Total		46,491	1.011

	40 Yr Old Silver Without Load	40 Yr Old Silver With Load	Ped Dental PMPM
Individual	250.61	253.48	1.79
Small Group	281.29	284.49	3.59
Grand Total	273.18	276.30	3.11

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective January 1, 2014
District of Columbia Small Group Exchange
Appendix I-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	KP DC Platinum (Perf/Dental)	KP DC Platinum (Perf/Dental)	KP DC Gold (Perf/Dental)	KP DC Gold (Perf/Dental)	KP DC Gold (Perf/Dental)	KP DC Gold (Perf/Dental)	KP DC Gold (Perf/Dental)	KP DC Silver (Perf/Dental)	KP DC Silver (Perf/Dental)	KP DC Silver (Perf/Dental)	KP DC Silver (Perf/Dental)	KP DC Silver (Perf/Dental)	KP DC Bronze (Perf/Dental)	KP DC Bronze (Perf/Dental)	KP DC Bronze (Perf/Dental)	KP DC Bronze (Perf/Dental)	KP DC Bronze (Perf/Dental)	KP DC Bronze (Perf/Dental)	KP DC Silver (Perf/Dental)	KP DC Gold (Perf/Dental)
20 and Under	\$271.30	\$255.54	\$252.14	\$245.96	\$242.73	\$235.04	\$225.50	\$203.20	\$190.82	\$189.49	\$185.97	\$154.05	\$151.71	\$155.98	\$145.66	\$171.71	\$217.91	\$260.43		
21	\$301.58	\$280.28	\$273.41	\$260.78	\$252.16	\$240.67	\$228.88	\$217.84	\$212.12	\$210.64	\$217.84	\$171.25	\$178.64	\$171.25	\$178.64	\$161.92	\$190.88	\$242.24	\$289.50	
22	\$301.58	\$280.28	\$273.41	\$260.78	\$252.16	\$240.67	\$228.88	\$217.84	\$212.12	\$210.64	\$217.84	\$171.25	\$178.64	\$171.25	\$178.64	\$161.92	\$190.88	\$242.24	\$289.50	
23	\$301.58	\$280.28	\$273.41	\$260.78	\$252.16	\$240.67	\$228.88	\$217.84	\$212.12	\$210.64	\$217.84	\$171.25	\$178.64	\$171.25	\$178.64	\$161.92	\$190.88	\$242.24	\$289.50	
24	\$301.58	\$280.28	\$273.41	\$260.78	\$252.16	\$240.67	\$228.88	\$217.84	\$212.12	\$210.64	\$217.84	\$171.25	\$178.64	\$171.25	\$178.64	\$161.92	\$190.88	\$242.24	\$289.50	
25	\$301.58	\$280.28	\$273.41	\$260.78	\$252.16	\$240.67	\$228.88	\$217.84	\$212.12	\$210.64	\$217.84	\$171.25	\$178.64	\$171.25	\$178.64	\$161.92	\$190.88	\$242.24	\$289.50	
26	\$301.58	\$280.28	\$273.41	\$260.78	\$252.16	\$240.67	\$228.88	\$217.84	\$212.12	\$210.64	\$217.84	\$171.25	\$178.64	\$171.25	\$178.64	\$161.92	\$190.88	\$242.24	\$289.50	
27	\$301.58	\$280.28	\$273.41	\$260.78	\$252.16	\$240.67	\$228.88	\$217.84	\$212.12	\$210.64	\$217.84	\$171.25	\$178.64	\$171.25	\$178.64	\$161.92	\$190.88	\$242.24	\$289.50	
28	\$308.64	\$294.11	\$275.66	\$256.01	\$256.01	\$256.01	\$251.16	\$222.93	\$175.25	\$182.82	\$175.25	\$165.71	\$182.82	\$175.25	\$165.71	\$182.82	\$175.25	\$165.71	\$247.90	\$296.26
29	\$315.27	\$300.44	\$275.01	\$258.82	\$261.15	\$261.52	\$262.04	\$227.73	\$186.75	\$179.02	\$227.73	\$186.75	\$179.02	\$227.73	\$186.75	\$179.02	\$227.73	\$186.75	\$253.23	\$302.64
30	\$323.16	\$307.95	\$282.96	\$267.08	\$268.05	\$268.05	\$268.05	\$237.42	\$204.59	\$237.42	\$204.59	\$237.42	\$204.59	\$237.42	\$204.59	\$237.42	\$204.59	\$237.42	\$310.20	\$359.56
31	\$331.45	\$315.86	\$300.45	\$280.04	\$300.45	\$300.45	\$274.94	\$275.49	\$244.25	\$233.13	\$275.49	\$244.25	\$233.13	\$275.49	\$244.25	\$233.13	\$275.49	\$244.25	\$318.17	\$374.87
32	\$338.92	\$322.97	\$314.98	\$297.26	\$320.74	\$320.74	\$320.74	\$281.13	\$258.38	\$281.13	\$258.38	\$281.13	\$258.38	\$281.13	\$258.38	\$281.13	\$258.38	\$281.13	\$325.33	\$381.87
33	\$346.80	\$332.31	\$314.40	\$297.27	\$328.27	\$328.27	\$328.27	\$285.75	\$263.93	\$285.75	\$263.93	\$285.75	\$263.93	\$285.75	\$263.93	\$285.75	\$263.93	\$285.75	\$332.90	\$392.64
34	\$355.10	\$338.39	\$330.02	\$310.42	\$324.55	\$324.55	\$324.55	\$286.14	\$264.96	\$286.14	\$264.96	\$286.14	\$264.96	\$286.14	\$264.96	\$286.14	\$264.96	\$286.14	\$340.86	\$400.86
35	\$363.73	\$346.39	\$337.73	\$318.01	\$332.60	\$332.60	\$332.60	\$292.11	\$270.45	\$292.11	\$270.45	\$292.11	\$270.45	\$292.11	\$270.45	\$292.11	\$270.45	\$292.11	\$348.81	\$408.81
36	\$371.09	\$354.20	\$345.44	\$336.97	\$337.89	\$338.31	\$338.94	\$278.39	\$261.43	\$269.61	\$268.48	\$221.06	\$220.17	\$221.70	\$219.56	\$225.25	\$238.55	\$298.55	\$356.79	
37	\$379.99	\$362.11	\$353.15	\$344.49	\$346.97	\$351.20	\$351.83	\$284.60	\$267.27	\$275.09	\$274.47	\$225.09	\$228.47	\$227.99	\$224.02	\$230.50	\$268.55	\$324.88	\$364.76	
38	\$384.55	\$366.46	\$356.46	\$348.62	\$351.84	\$351.98	\$351.62	\$288.02	\$270.48	\$277.13	\$276.48	\$228.36	\$227.79	\$227.99	\$226.47	\$234.39	\$284.87	\$339.14	\$389.14	
39	\$389.11	\$370.81	\$361.63	\$352.76	\$356.12	\$356.44	\$356.12	\$291.44	\$272.69	\$277.49	\$276.69	\$232.12	\$231.72	\$231.99	\$229.48	\$232.54	\$281.54	\$336.54	\$386.54	
40	\$404.46	\$386.43	\$375.90	\$363.93	\$373.50	\$373.97	\$373.50	\$302.93	\$284.49	\$289.58	\$288.59	\$237.17	\$236.77	\$237.17	\$235.67	\$243.88	\$294.88	\$349.88	\$399.88	
41	\$420.23	\$400.45	\$390.55	\$380.97	\$384.09	\$384.57	\$384.28	\$314.74	\$295.57	\$299.51	\$298.54	\$230.54	\$229.62	\$229.99	\$227.84	\$231.55	\$282.55	\$337.55	\$387.55	
42	\$436.82	\$416.27	\$406.97	\$396.01	\$396.84	\$397.34	\$396.84	\$327.17	\$307.24	\$305.10	\$303.52	\$231.55	\$230.63	\$231.55	\$229.48	\$233.15	\$284.15	\$339.15	\$389.15	
43	\$453.41	\$432.47	\$421.77	\$411.43	\$412.47	\$413.91	\$413.91	\$337.20	\$317.65	\$315.92	\$314.68	\$236.92	\$236.02	\$236.92	\$234.84	\$238.54	\$293.54	\$348.54	\$398.54	
44	\$471.67	\$449.47	\$447.60	\$438.35	\$442.60	\$443.70	\$443.70	\$353.27	\$331.75	\$329.44	\$328.49	\$238.69	\$237.79	\$238.69	\$236.61	\$240.31	\$295.31	\$350.31	\$395.31	
45	\$489.92	\$466.87	\$465.32	\$454.15	\$460.82	\$462.38	\$462.38	\$366.94	\$344.59	\$342.18	\$341.68	\$239.58	\$238.68	\$239.58	\$237.50	\$241.20	\$296.20	\$351.20	\$396.20	
46	\$509.00	\$485.05	\$483.05	\$473.05	\$481.23	\$482.21	\$482.06	\$381.23	\$358.01	\$355.51	\$354.66	\$237.66	\$236.76	\$237.66	\$235.58	\$239.28	\$294.28	\$349.28	\$394.28	
47	\$529.00	\$504.00	\$501.56	\$491.56	\$496.12	\$497.82	\$497.82	\$396.12	\$372.82	\$369.42	\$368.57	\$238.57	\$237.67	\$238.57	\$236.49	\$240.19	\$295.19	\$350.19	\$395.19	
48	\$549.00	\$523.79	\$520.83	\$510.83	\$514.30	\$516.05	\$516.05	\$411.68	\$385.91	\$383.91	\$383.06	\$239.02	\$238.12	\$239.02	\$236.94	\$240.64	\$295.64	\$350.64	\$395.64	
49	\$571.23	\$544.35	\$540.88	\$527.88	\$531.86	\$534.78	\$534.78	\$427.83	\$401.78	\$398.97	\$398.12	\$241.61	\$240.71	\$241.61	\$239.53	\$243.23	\$298.23	\$353.23	\$398.23	
50	\$593.63	\$565.70	\$562.70	\$552.70	\$558.17	\$560.41	\$560.41	\$449.72	\$423.40	\$420.40	\$419.55	\$243.55	\$242.65	\$243.55	\$241.47	\$245.17	\$300.17	\$355.17	\$395.17	
51	\$616.23	\$587.29	\$584.83	\$571.29	\$576.23	\$579.15	\$579.15	\$469.23	\$442.88	\$439.88	\$439.03	\$245.03	\$244.13	\$245.03	\$242.95	\$246.65	\$301.65	\$356.65	\$396.65	
52	\$640.92	\$610.76	\$607.66	\$594.96	\$599.65	\$603.63	\$603.63	\$489.03	\$462.68	\$459.68	\$458.83	\$246.83	\$245.93	\$246.83	\$244.75	\$248.45	\$303.45	\$358.45	\$398.45	
53	\$665.81	\$634.48	\$631.38	\$618.78	\$623.61	\$627.59	\$627.59	\$509.68	\$483.33	\$480.33	\$479.48	\$247.98	\$247.08	\$247.98	\$245.90	\$249.60	\$304.60	\$359.60	\$399.60	
54	\$691.41	\$659.38	\$656.07	\$642.37	\$647.70	\$652.58	\$652.58	\$529.25	\$502.90	\$499.90	\$499.05	\$249.05	\$248.15	\$249.05	\$246.97	\$250.67	\$305.67	\$360.67	\$400.67	
55	\$718.01	\$685.98	\$682.11	\$668.11	\$673.54	\$678.97	\$678.97	\$549.25	\$522.90	\$519.90	\$519.05	\$250.05	\$249.15	\$250.05	\$247.97	\$251.67	\$306.67	\$361.67	\$406.67	
56	\$747.11	\$714.96	\$711.66	\$697.32	\$702.75	\$708.18	\$708.18	\$569.57	\$543.22	\$540.22	\$539.37	\$251.37	\$250.47	\$251.37	\$249.29	\$252.99	\$307.99	\$362.99	\$407.99	
57	\$776.15	\$743.63	\$740.13	\$725.33	\$730.76	\$736.19	\$736.19	\$589.89	\$563.54	\$560.54	\$559.69	\$252.69	\$251.79	\$252.69	\$250.61	\$254.21	\$309.21	\$364.21	\$409.21	
58	\$806.44	\$774.49	\$771.10	\$756.48	\$761.91	\$767.34	\$767.34	\$609.99	\$583.64	\$580.64	\$579.79	\$253.79	\$252.89	\$253.79	\$251.71	\$255.31	\$310.31	\$365.31	\$410.31	
59	\$837.78	\$796.46	\$792.58	\$777.48	\$782.91	\$788.34	\$788.34	\$630.28	\$603.93	\$600.93	\$599.98	\$254.98	\$254.08	\$254.98	\$252.90	\$256.50	\$311.50	\$366.50	\$411.50	
60	\$870.73	\$829.77	\$825.27	\$809.24	\$814.67	\$820.10	\$820.10	\$650.52	\$624.17	\$621.17	\$620.32	\$256.32	\$255.42	\$256.32	\$254.24	\$257.84	\$312.84	\$367.84	\$412.84	
61	\$904.75	\$862.18	\$858.05	\$840.85	\$846.28	\$851.71	\$851.71	\$670.64	\$644.29	\$641.29	\$640.44	\$257.44	\$256.54	\$257.44	\$255.36	\$258.96	\$313.96	\$368.96	\$413.96	
62	\$904.75	\$862.18	\$858.05	\$840.85	\$846.28	\$851.71	\$851.71	\$670.64	\$644.29	\$641.29	\$640.44	\$257.44	\$256.54	\$257.44	\$255.36	\$258.96	\$313.96	\$368.96	\$413.96	
63	\$904.75	\$862.18	\$858.05	\$840.85	\$846.28	\$851.71	\$851.71	\$670.64	\$644.29	\$641.29	\$640.44	\$257.44	\$256.54	\$257.44	\$255.36	\$258.96	\$313.96	\$368.96	\$413.96	
64+	\$904.75	\$862.18	\$858.05	\$840.85	\$846.28	\$851.71	\$851.71	\$670.64	\$644.29	\$641.29	\$640.44	\$257.44	\$256.54	\$257.44	\$255.36	\$258.96	\$313.96	\$368.96	\$413.96	

Rates effective January 1, 2014
District of Columbia Small Group Exchange
Appendix I-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$284.87	\$271.46	\$264.75	\$258.25	\$235.97	\$236.29
21	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
22	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
23	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
24	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
25	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
26	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
27	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
28	\$324.07	\$308.82	\$301.18	\$293.79	\$268.44	\$268.81
29	\$331.04	\$315.46	\$307.66	\$300.11	\$274.21	\$274.59
30	\$339.31	\$323.35	\$315.35	\$307.61	\$281.07	\$281.46
31	\$348.02	\$331.65	\$323.44	\$315.51	\$288.28	\$288.68
32	\$355.86	\$339.12	\$330.73	\$322.62	\$294.78	\$295.19
33	\$364.14	\$347.01	\$338.42	\$330.12	\$301.63	\$302.05
34	\$372.85	\$355.31	\$346.52	\$338.02	\$308.85	\$309.28
35	\$381.56	\$363.61	\$354.61	\$345.92	\$316.06	\$316.50
36	\$390.28	\$371.91	\$362.71	\$353.81	\$323.28	\$323.73
37	\$398.99	\$380.21	\$370.81	\$361.71	\$330.50	\$330.96
38	\$403.78	\$384.78	\$375.26	\$366.06	\$334.47	\$334.93
39	\$408.57	\$389.35	\$379.71	\$370.40	\$338.43	\$338.90
40	\$424.69	\$404.70	\$394.69	\$385.01	\$351.78	\$352.27
41	\$441.24	\$420.48	\$410.07	\$400.02	\$365.49	\$366.00
42	\$458.66	\$437.08	\$426.27	\$415.81	\$379.93	\$380.45
43	\$476.52	\$454.10	\$442.86	\$432.00	\$394.72	\$395.27
44	\$495.25	\$471.95	\$460.27	\$448.98	\$410.23	\$410.80
45	\$514.41	\$490.21	\$478.08	\$466.36	\$426.11	\$426.70
46	\$534.45	\$509.30	\$496.70	\$484.52	\$442.71	\$443.32
47	\$555.36	\$529.23	\$516.13	\$503.47	\$460.03	\$460.66
48	\$577.14	\$549.98	\$536.37	\$523.22	\$478.07	\$478.73
49	\$599.79	\$571.57	\$557.42	\$543.75	\$496.83	\$497.52
50	\$623.31	\$593.98	\$579.28	\$565.08	\$516.31	\$517.03
51	\$647.70	\$617.22	\$601.95	\$587.19	\$536.52	\$537.26
52	\$672.96	\$641.30	\$625.43	\$610.09	\$557.44	\$558.22
53	\$699.10	\$666.20	\$649.72	\$633.79	\$579.09	\$579.90
54	\$726.54	\$692.35	\$675.22	\$658.66	\$601.82	\$602.66
55	\$754.85	\$719.33	\$701.54	\$684.33	\$625.27	\$626.14
56	\$784.47	\$747.56	\$729.06	\$711.18	\$649.81	\$650.71
57	\$814.96	\$776.62	\$757.40	\$738.82	\$675.06	\$676.00
58	\$846.76	\$806.92	\$786.95	\$767.65	\$701.40	\$702.38
59	\$879.86	\$838.46	\$817.72	\$797.66	\$728.82	\$729.84
60	\$914.27	\$871.25	\$849.70	\$828.86	\$757.33	\$758.38
61	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01
62	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01
63	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01
64+	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective April 1, 2014
District of Columbia Small Group Exchange

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold	
Year	KP DC Platinum 2000	DC Platinum 2000	KP DC Platinum 2000	DC Platinum 2000	KP DC Gold 2000	DC Gold 2000	KP DC Silver 2000	DC Silver 2000	KP DC Silver 2000	DC Silver 2000	KP DC Bronze 2000	DC Bronze 2000	KP DC Bronze 2000	DC Bronze 2000	KP DC Bronze 2000	DC Bronze 2000	KP DC Silver 2000	DC Silver 2000	KP DC Gold 2000	
20 Under	\$273.64	\$260.77	\$254.32	\$248.08	\$235.97	\$229.99	\$227.44	\$204.95	\$192.47	\$191.13	\$197.66	\$155.38	\$162.09	\$157.33	\$174.89	\$163.32	\$173.19	\$219.79	\$262.68	
21	\$304.19	\$289.88	\$282.70	\$275.77	\$262.81	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$180.19	\$174.89	\$163.32	\$192.53	\$174.89	\$244.33	\$292.00	
22	\$304.19	\$289.88	\$282.70	\$275.77	\$262.81	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$180.19	\$174.89	\$163.32	\$192.53	\$174.89	\$244.33	\$292.00	
23	\$304.19	\$289.88	\$282.70	\$275.77	\$262.81	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$180.19	\$174.89	\$163.32	\$192.53	\$174.89	\$244.33	\$292.00	
24	\$304.19	\$289.88	\$282.70	\$275.77	\$262.81	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$180.19	\$174.89	\$163.32	\$192.53	\$174.89	\$244.33	\$292.00	
25	\$304.19	\$289.88	\$282.70	\$275.77	\$262.81	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$180.19	\$174.89	\$163.32	\$192.53	\$174.89	\$244.33	\$292.00	
26	\$304.19	\$289.88	\$282.70	\$275.77	\$262.81	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$180.19	\$174.89	\$163.32	\$192.53	\$174.89	\$244.33	\$292.00	
27	\$304.19	\$289.88	\$282.70	\$275.77	\$262.81	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$180.19	\$174.89	\$163.32	\$192.53	\$174.89	\$244.33	\$292.00	
28	\$311.30	\$296.65	\$289.31	\$282.22	\$257.86	\$248.22	\$258.74	\$233.16	\$218.96	\$217.43	\$224.86	\$176.77	\$184.40	\$178.98	\$167.14	\$207.03	\$250.04	\$298.82	\$350.45	
29	\$318.00	\$303.03	\$295.54	\$286.31	\$263.17	\$253.78	\$263.17	\$238.17	\$223.11	\$222.69	\$229.69	\$180.57	\$192.83	\$187.07	\$170.74	\$212.83	\$241.19	\$295.42	\$350.45	
30	\$325.95	\$310.61	\$302.92	\$295.50	\$269.99	\$270.37	\$270.91	\$244.13	\$229.26	\$227.66	\$235.44	\$185.08	\$193.07	\$187.40	\$175.00	\$226.30	\$261.80	\$312.88	\$350.45	
31	\$334.58	\$310.70	\$314.58	\$310.70	\$277.31	\$280.83	\$277.31	\$241.58	\$229.40	\$227.83	\$235.44	\$185.08	\$193.07	\$187.40	\$175.00	\$226.30	\$261.80	\$312.88	\$350.45	
32	\$341.85	\$307.92	\$302.92	\$295.50	\$269.99	\$270.37	\$270.91	\$244.13	\$229.26	\$227.66	\$235.44	\$185.08	\$193.07	\$187.40	\$175.00	\$226.30	\$261.80	\$312.88	\$350.45	
33	\$349.80	\$333.34	\$325.09	\$317.12	\$280.75	\$290.15	\$290.74	\$261.99	\$246.03	\$244.32	\$252.66	\$198.63	\$207.20	\$201.11	\$187.81	\$221.39	\$280.96	\$335.78	\$350.45	
34	\$358.16	\$341.31	\$332.87	\$324.70	\$296.68	\$307.09	\$307.69	\$268.26	\$251.92	\$250.36	\$258.71	\$203.38	\$212.16	\$206.92	\$192.30	\$226.69	\$287.68	\$343.81	\$350.45	
35	\$366.29	\$340.64	\$332.29	\$324.70	\$296.68	\$307.09	\$307.69	\$268.26	\$251.92	\$250.36	\$258.71	\$203.38	\$212.16	\$206.92	\$192.30	\$226.69	\$287.68	\$343.81	\$350.45	
36	\$374.90	\$357.26	\$348.42	\$339.88	\$310.55	\$301.08	\$311.60	\$280.79	\$263.69	\$261.85	\$270.80	\$212.88	\$222.07	\$221.55	\$201.29	\$237.28	\$301.12	\$359.87	\$350.45	
37	\$383.27	\$356.20	\$347.46	\$338.56	\$317.92	\$308.58	\$318.56	\$287.06	\$269.58	\$267.70	\$276.84	\$220.36	\$227.03	\$226.58	\$205.78	\$242.58	\$307.85	\$367.91	\$350.45	
38	\$387.87	\$369.62	\$360.48	\$351.64	\$321.29	\$313.74	\$322.39	\$272.82	\$250.91	\$249.07	\$258.17	\$220.25	\$227.76	\$227.00	\$208.25	\$245.49	\$311.54	\$372.32	\$350.45	
39	\$392.47	\$374.01	\$364.75	\$355.81	\$325.55	\$317.96	\$327.12	\$276.15	\$256.49	\$254.65	\$263.81	\$222.42	\$229.96	\$229.21	\$210.47	\$248.74	\$316.74	\$376.74	\$350.45	
40	\$407.96	\$388.76	\$379.14	\$369.84	\$337.93	\$338.40	\$339.38	\$290.55	\$268.94	\$266.94	\$276.04	\$231.65	\$234.65	\$234.55	\$219.04	\$258.20	\$327.67	\$391.60	\$350.45	
41	\$423.86	\$403.91	\$393.92	\$384.26	\$351.10	\$351.58	\$352.29	\$317.46	\$298.13	\$296.04	\$306.16	\$240.68	\$251.07	\$242.69	\$227.57	\$268.27	\$340.45	\$406.87	\$350.45	
42	\$440.59	\$419.86	\$409.47	\$399.63	\$364.96	\$366.47	\$366.20	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$252.32	\$236.56	\$278.86	\$335.89	\$422.93	\$350.45	
43	\$457.75	\$437.21	\$425.42	\$414.08	\$379.78	\$381.94	\$379.78	\$341.00	\$320.64	\$318.41	\$327.15	\$269.92	\$281.31	\$270.18	\$259.72	\$307.67	\$349.40	\$439.40	\$350.45	
44	\$475.74	\$453.36	\$442.14	\$431.29	\$394.07	\$396.42	\$395.42	\$356.32	\$334.62	\$332.28	\$343.64	\$270.14	\$281.80	\$273.52	\$255.43	\$301.11	\$382.12	\$456.67	\$350.45	
45	\$494.15	\$470.90	\$459.25	\$447.98	\$408.32	\$409.89	\$408.32	\$370.11	\$349.57	\$345.14	\$356.93	\$280.59	\$292.71	\$284.11	\$265.31	\$312.76	\$396.91	\$474.34	\$350.45	
46	\$513.40	\$489.24	\$477.14	\$465.43	\$425.27	\$425.86	\$426.72	\$384.52	\$358.58	\$356.11	\$370.84	\$291.52	\$304.11	\$296.17	\$275.65	\$324.94	\$412.37	\$492.82	\$350.45	
47	\$533.48	\$500.38	\$495.80	\$483.54	\$443.50	\$443.64	\$443.50	\$401.65	\$372.61	\$369.57	\$386.34	\$312.65	\$326.43	\$316.65	\$296.23	\$348.84	\$428.36	\$512.10	\$350.45	
48	\$554.40	\$528.32	\$515.24	\$502.61	\$459.87	\$460.80	\$461.24	\$418.95	\$389.95	\$387.22	\$400.45	\$314.81	\$328.40	\$320.67	\$299.76	\$350.89	\$445.30	\$532.18	\$350.45	
49	\$576.16	\$549.05	\$532.33	\$517.25	\$477.92	\$478.88	\$481.53	\$430.25	\$402.42	\$401.27	\$416.17	\$331.29	\$341.29	\$330.35	\$303.65	\$364.66	\$462.78	\$553.07	\$350.45	
50	\$598.75	\$570.58	\$555.46	\$542.82	\$499.66	\$500.66	\$497.66	\$448.45	\$418.20	\$417.20	\$432.49	\$339.09	\$354.67	\$351.48	\$328.96	\$378.96	\$480.92	\$574.75	\$350.45	
51	\$622.91	\$592.74	\$578.24	\$564.06	\$515.38	\$516.24	\$515.38	\$464.03	\$433.57	\$432.49	\$448.45	\$343.45	\$360.42	\$357.72	\$330.79	\$399.72	\$499.73	\$597.25	\$350.45	
52	\$646.45	\$616.04	\$600.79	\$586.06	\$535.48	\$536.23	\$535.48	\$484.18	\$454.69	\$453.52	\$466.94	\$367.08	\$382.93	\$371.67	\$347.09	\$409.15	\$519.24	\$620.54	\$350.45	
53	\$671.56	\$642.13	\$628.13	\$608.82	\$557.08	\$558.28	\$557.08	\$501.33	\$472.35	\$469.05	\$484.08	\$386.11	\$402.35	\$396.11	\$364.05	\$425.04	\$539.40	\$644.64	\$350.45	
54	\$697.92	\$665.08	\$648.62	\$632.72	\$578.11	\$579.92	\$578.11	\$520.88	\$487.46	\$484.76	\$504.12	\$396.30	\$413.41	\$401.26	\$374.72	\$441.73	\$560.57	\$669.94	\$350.45	
55	\$725.12	\$691.09	\$673.90	\$657.17	\$603.79	\$605.48	\$603.79	\$540.46	\$502.46	\$500.46	\$519.46	\$401.46	\$419.46	\$411.46	\$380.46	\$452.46	\$580.46	\$696.05	\$350.45	
56	\$753.57	\$718.11	\$700.34	\$682.58	\$626.34	\$628.34	\$626.34	\$562.43	\$525.33	\$523.33	\$543.33	\$427.30	\$446.38	\$443.38	\$404.60	\$476.95	\$605.27	\$723.36	\$350.45	
57	\$782.86	\$749.02	\$727.56	\$707.47	\$648.47	\$649.37	\$648.47	\$580.68	\$540.64	\$538.64	\$558.64	\$444.53	\$464.73	\$461.73	\$420.32	\$495.49	\$628.80	\$751.48	\$350.45	
58	\$813.40	\$775.13	\$753.95	\$737.71	\$670.77	\$671.77	\$670.77	\$606.12	\$566.12	\$564.12	\$584.12	\$461.88	\$481.82	\$478.82	\$436.72	\$514.82	\$643.33	\$780.80	\$350.45	
59	\$845.20	\$805.43	\$785.50	\$766.24	\$700.24	\$701.24	\$700.24	\$630.49	\$590.49	\$588.49	\$608.49	\$485.94	\$505.94	\$503.94	\$463.04	\$543.04	\$678.87	\$811.12	\$350.45	
60	\$878.26	\$836.93	\$816.23	\$796.21	\$727.49	\$728.49	\$727.49	\$657.80	\$617.80	\$615.80	\$635.80	\$513.42	\$533.42	\$531.42	\$490.42	\$569.42	\$705.42	\$843.05	\$350.45	
61	\$912.57	\$869.63	\$848.11	\$827.31	\$756.96	\$757.96	\$756.96	\$687.38	\$647.38	\$645.38	\$665.38	\$543.16	\$563.16	\$561.16	\$520.16	\$599.16	\$739.16	\$879.16	\$350.45	
62	\$912.57	\$869.63	\$848.11	\$827.31	\$756.96	\$757.96	\$756.96	\$687.38	\$647.38	\$645.38	\$665.38	\$543.16	\$563.16	\$561.16	\$520.16	\$599.16	\$739.16	\$879.16	\$350.45	
63	\$912.57	\$869.63	\$848.11	\$827.31	\$756.96	\$757.96	\$756.96	\$687.38	\$647.38	\$645.38	\$665.38	\$543.16	\$563.16	\$561.16	\$520.16	\$599.16	\$739.16	\$879.16	\$350.45	
64	\$912.57	\$869.63	\$848.11	\$827.31	\$756.96	\$757.96	\$756.96	\$687.38	\$647.38	\$645.38	\$665.38	\$543.16	\$563.16	\$561.16	\$520.16	\$599.16	\$739.16	\$879.16	\$350.45	

Rates effective April 1, 2014
District of Columbia Small Group Exchange
Appendix II-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$287.33	\$273.81	\$267.03	\$260.48	\$238.00	\$238.33
21	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
22	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
23	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
24	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
25	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
26	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
27	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
28	\$326.87	\$311.49	\$303.78	\$296.33	\$270.76	\$271.13
29	\$333.90	\$318.19	\$310.31	\$302.70	\$276.58	\$276.96
30	\$342.24	\$326.14	\$318.07	\$310.27	\$283.49	\$283.89
31	\$351.03	\$334.51	\$326.24	\$318.24	\$290.77	\$291.18
32	\$358.94	\$342.05	\$333.59	\$325.41	\$297.32	\$297.74
33	\$367.29	\$350.00	\$341.34	\$332.97	\$304.24	\$304.66
34	\$376.07	\$358.38	\$349.51	\$340.94	\$311.52	\$311.95
35	\$384.86	\$366.75	\$357.68	\$348.90	\$318.79	\$319.24
36	\$393.65	\$375.12	\$365.84	\$356.87	\$326.07	\$326.53
37	\$402.43	\$383.50	\$374.01	\$364.84	\$333.35	\$333.81
38	\$407.27	\$388.10	\$378.50	\$369.22	\$337.35	\$337.82
39	\$412.10	\$392.71	\$382.99	\$373.60	\$341.36	\$341.83
40	\$428.35	\$408.20	\$398.10	\$388.34	\$354.82	\$355.32
41	\$445.05	\$424.11	\$413.61	\$403.47	\$368.65	\$369.16
42	\$462.62	\$440.85	\$429.95	\$419.40	\$383.21	\$383.74
43	\$480.63	\$458.02	\$446.69	\$435.73	\$398.13	\$398.68
44	\$499.53	\$476.02	\$464.24	\$452.86	\$413.78	\$414.35
45	\$518.86	\$494.44	\$482.21	\$470.38	\$429.79	\$430.39
46	\$539.07	\$513.70	\$500.99	\$488.71	\$446.53	\$447.15
47	\$560.15	\$533.80	\$520.59	\$507.82	\$464.00	\$464.64
48	\$582.12	\$554.73	\$541.01	\$527.74	\$482.20	\$482.86
49	\$604.97	\$576.50	\$562.24	\$548.45	\$501.12	\$501.81
50	\$628.69	\$599.11	\$584.29	\$569.96	\$520.77	\$521.49
51	\$653.29	\$622.56	\$607.15	\$592.26	\$541.15	\$541.90
52	\$678.78	\$646.84	\$630.83	\$615.36	\$562.26	\$563.04
53	\$705.14	\$671.96	\$655.33	\$639.26	\$584.09	\$584.90
54	\$732.81	\$698.33	\$681.06	\$664.35	\$607.02	\$607.86
55	\$761.37	\$725.55	\$707.60	\$690.24	\$630.67	\$631.55
56	\$791.25	\$754.02	\$735.36	\$717.33	\$655.42	\$656.33
57	\$822.00	\$783.32	\$763.94	\$745.21	\$680.90	\$681.84
58	\$854.07	\$813.89	\$793.75	\$774.28	\$707.46	\$708.44
59	\$887.46	\$845.70	\$824.78	\$804.55	\$735.12	\$736.14
60	\$922.17	\$878.78	\$857.04	\$836.02	\$763.87	\$764.93
61	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81
62	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81
63	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81
64+	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective July 1, 2014
District of Columbia Small Group Exchange
Appendix III-A

	1	2	3	4	5	6	7	9	10	11	12	14	15	16	17	18	19	20
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	P DC Platinum 4000/Dental/Pol/Dent	P DC Platinum 4000/Dental/Pol/Dent	KP DC Gold 4200/Dental/Pol/Dental	DC Gold 3800/Dental/Pol/Dent	P DC Gold 3800/Dental/Pol/Dent	P DC Gold 3200/Dental/Pol/Dent	KP DC Gold 3200/Dental/Pol/Dental	P DC Silver 3200/Dental/Pol/Dent	P DC Silver 2800/Dental/Pol/Dent	DC Silver 2500/Dental/Pol/Dent	KP DC Silver 2500/Dental/Pol/Dental	P DC Bronze 4200/Dental/Pol/Dent	P DC Bronze 4200/Dental/Pol/Dent	P DC Bronze 4000/Dental/Pol/Dent	P DC Bronze 4000/Dental/Pol/Dent	P DC Bronze 4000/Dental/Pol/Dent	KP DC Silver 2000/Dental/Pol/Dental	KP DC Gold 1000/Dental/Pol/Dental
20 and Under	\$276.01	\$265.02	\$256.51	\$238.95	\$228.63	\$226.22	\$229.41	\$206.72	\$194.13	\$191.78	\$199.37	\$156.73	\$163.49	\$158.69	\$148.19	\$174.69	\$221.69	\$264.94
21	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
22	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
23	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
24	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
25	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
26	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
27	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
28	\$313.99	\$299.22	\$291.81	\$284.66	\$260.09	\$260.45	\$260.98	\$235.17	\$220.85	\$219.31	\$226.80	\$178.29	\$185.99	\$180.53	\$168.38	\$198.73	\$252.20	\$301.40
29	\$320.74	\$305.65	\$298.09	\$290.78	\$265.68	\$266.05	\$266.59	\$240.23	\$225.60	\$224.02	\$231.68	\$182.13	\$189.99	\$184.41	\$172.21	\$203.00	\$257.62	\$307.89
30	\$328.76	\$313.29	\$305.54	\$298.05	\$272.33	\$272.70	\$273.25	\$246.24	\$231.24	\$229.62	\$237.47	\$186.68	\$194.74	\$189.02	\$176.52	\$208.08	\$264.06	\$315.58
31	\$337.20	\$321.34	\$313.39	\$305.70	\$279.32	\$279.71	\$280.27	\$252.56	\$237.18	\$235.52	\$243.57	\$191.47	\$199.74	\$193.87	\$181.05	\$213.42	\$270.84	\$323.69
32	\$344.80	\$328.58	\$320.45	\$312.59	\$285.61	\$286.01	\$286.58	\$258.25	\$242.52	\$240.83	\$249.05	\$195.79	\$204.24	\$198.24	\$185.13	\$218.23	\$276.95	\$330.98
33	\$352.82	\$336.22	\$327.90	\$319.86	\$292.25	\$292.66	\$293.25	\$264.25	\$248.16	\$246.43	\$254.85	\$208.99	\$200.34	\$204.85	\$189.43	\$223.31	\$285.39	\$338.68
34	\$361.26	\$344.26	\$335.74	\$327.51	\$299.24	\$299.66	\$300.26	\$270.58	\$254.10	\$252.32	\$260.94	\$205.13	\$213.99	\$209.93	\$193.96	\$228.65	\$290.17	\$346.78
35	\$369.70	\$352.30	\$343.59	\$335.16	\$306.24	\$306.66	\$307.28	\$276.90	\$260.03	\$258.22	\$267.04	\$209.93	\$218.99	\$212.56	\$198.49	\$233.99	\$296.95	\$354.88
36	\$378.14	\$360.35	\$351.43	\$342.81	\$313.23	\$313.66	\$314.30	\$283.22	\$265.97	\$264.11	\$273.14	\$214.72	\$223.99	\$217.41	\$203.03	\$239.33	\$303.73	\$362.98
37	\$386.58	\$368.39	\$359.28	\$350.46	\$320.22	\$320.66	\$321.31	\$289.54	\$271.91	\$270.01	\$279.23	\$219.51	\$228.99	\$222.26	\$207.56	\$244.67	\$310.50	\$371.08
38	\$391.22	\$373.81	\$363.39	\$354.67	\$324.07	\$324.52	\$325.17	\$293.02	\$275.17	\$273.25	\$282.59	\$222.15	\$231.74	\$224.93	\$210.05	\$247.61	\$314.23	\$375.54
39	\$395.86	\$377.24	\$367.90	\$358.88	\$327.91	\$328.37	\$329.03	\$296.49	\$278.44	\$276.49	\$286.94	\$224.78	\$234.49	\$227.60	\$212.54	\$250.55	\$317.96	\$380.00
40	\$411.48	\$392.12	\$382.42	\$373.04	\$340.85	\$341.32	\$342.01	\$308.19	\$289.42	\$287.40	\$297.22	\$233.65	\$243.74	\$236.58	\$220.93	\$260.43	\$330.50	\$394.99
41	\$427.52	\$407.40	\$397.32	\$387.58	\$354.13	\$354.62	\$355.34	\$320.20	\$300.70	\$298.60	\$308.80	\$242.76	\$253.24	\$245.80	\$229.54	\$270.58	\$343.39	\$410.38
42	\$444.40	\$423.49	\$413.01	\$402.88	\$368.11	\$368.62	\$369.37	\$332.85	\$312.57	\$310.39	\$320.80	\$252.34	\$263.24	\$255.50	\$238.60	\$281.27	\$356.94	\$426.59
43	\$461.70	\$439.98	\$429.09	\$418.57	\$382.45	\$382.98	\$383.75	\$345.81	\$324.75	\$322.48	\$333.50	\$262.17	\$273.49	\$265.45	\$247.89	\$292.22	\$370.84	\$443.19
44	\$479.85	\$457.27	\$446.96	\$435.02	\$397.48	\$398.03	\$398.83	\$359.40	\$337.51	\$335.15	\$346.60	\$272.47	\$284.24	\$275.89	\$257.64	\$303.71	\$385.42	\$460.61
45	\$498.42	\$474.97	\$463.21	\$451.85	\$412.86	\$413.43	\$414.27	\$373.31	\$350.57	\$348.12	\$360.02	\$283.02	\$295.24	\$286.56	\$267.61	\$315.46	\$400.33	\$478.44
46	\$517.83	\$493.47	\$481.26	\$469.45	\$428.94	\$429.54	\$430.40	\$387.85	\$364.23	\$361.68	\$374.04	\$294.04	\$306.74	\$297.72	\$278.03	\$327.75	\$415.93	\$497.08
47	\$538.09	\$512.77	\$500.08	\$487.82	\$445.72	\$446.34	\$447.24	\$403.02	\$378.47	\$375.83	\$388.67	\$305.54	\$318.74	\$308.90	\$288.90	\$342.20	\$432.20	\$516.52
48	\$559.19	\$532.88	\$519.49	\$506.95	\$463.20	\$463.84	\$464.78	\$418.82	\$393.32	\$390.57	\$403.91	\$317.53	\$331.24	\$321.50	\$300.23	\$353.92	\$449.15	\$536.78
49	\$581.14	\$553.79	\$540.09	\$526.84	\$481.38	\$482.05	\$483.02	\$435.26	\$408.75	\$405.90	\$419.76	\$329.99	\$344.24	\$334.12	\$316.81	\$367.81	\$466.77	\$557.84
50	\$603.93	\$575.51	\$561.27	\$547.50	\$500.26	\$500.95	\$501.96	\$452.33	\$424.78	\$421.81	\$436.23	\$342.93	\$357.74	\$347.22	\$324.25	\$382.24	\$485.08	\$579.72
51	\$627.56	\$598.03	\$583.23	\$568.93	\$519.83	\$520.55	\$521.60	\$470.03	\$441.40	\$438.32	\$453.30	\$356.35	\$371.74	\$360.81	\$336.94	\$397.19	\$504.06	\$602.40
52	\$652.04	\$621.36	\$605.98	\$591.12	\$540.11	\$540.86	\$541.95	\$488.36	\$458.62	\$455.42	\$470.98	\$370.25	\$386.24	\$374.88	\$350.08	\$412.69	\$523.72	\$625.90
53	\$677.36	\$645.49	\$629.52	\$614.08	\$561.08	\$561.86	\$563.00	\$507.23	\$476.43	\$473.10	\$489.27	\$384.63	\$401.23	\$389.44	\$363.68	\$428.71	\$544.06	\$650.21
54	\$703.95	\$670.82	\$654.23	\$638.18	\$583.11	\$583.92	\$585.09	\$527.24	\$495.13	\$491.67	\$508.47	\$399.72	\$416.98	\$404.73	\$377.96	\$445.54	\$565.42	\$675.73
55	\$731.38	\$696.97	\$679.72	\$663.05	\$605.83	\$606.67	\$607.90	\$547.79	\$514.43	\$510.83	\$528.29	\$415.30	\$433.23	\$420.50	\$392.68	\$462.90	\$587.45	\$702.06
56	\$760.08	\$724.31	\$706.39	\$689.07	\$629.60	\$630.48	\$631.75	\$569.28	\$534.61	\$530.88	\$549.02	\$431.60	\$450.23	\$437.00	\$408.09	\$481.07	\$610.50	\$729.61
57	\$789.62	\$752.47	\$733.85	\$715.85	\$654.07	\$654.94	\$656.30	\$591.41	\$555.39	\$551.51	\$570.36	\$448.37	\$467.73	\$453.99	\$424.95	\$499.77	\$634.23	\$757.97
58	\$820.43	\$783.82	\$763.48	\$743.78	\$679.59	\$680.54	\$681.91	\$614.48	\$577.06	\$573.03	\$592.61	\$465.87	\$485.98	\$471.70	\$440.49	\$519.26	\$658.08	\$787.54
59	\$852.50	\$812.39	\$792.29	\$772.86	\$706.16	\$707.14	\$708.57	\$638.51	\$599.62	\$595.43	\$615.78	\$484.08	\$504.98	\$490.14	\$457.72	\$539.57	\$684.74	\$818.33
60	\$885.84	\$844.16	\$823.28	\$803.08	\$733.78	\$734.80	\$736.28	\$663.48	\$623.07	\$618.72	\$639.86	\$503.01	\$524.73	\$509.31	\$475.62	\$560.67	\$711.52	\$850.33
61	\$920.45	\$877.14	\$855.44	\$834.46	\$762.44	\$763.50	\$765.04	\$689.40	\$647.41	\$642.89	\$664.86	\$522.66	\$545.23	\$529.20	\$494.20	\$582.57	\$739.31	\$883.55
62	\$920.45	\$877.14	\$855.44	\$834.46	\$762.44	\$763.50	\$765.04	\$689.40	\$647.41	\$642.89	\$664.86	\$522.66	\$545.23	\$529.20	\$494.20	\$582.57	\$739.31	\$883.55
63	\$920.45	\$877.14	\$855.44	\$834.46	\$762.44	\$763.50	\$765.04	\$689.40	\$647.41	\$642.89	\$664.86	\$522.66	\$545.23	\$529.20	\$494.20	\$582.57	\$739.31	\$883.55
64+	\$920.45	\$877.14	\$855.44	\$834.46	\$762.44	\$763.50	\$765.04	\$689.40	\$647.41	\$642.89	\$664.86	\$522.66	\$545.23	\$529.20	\$494.20	\$582.57	\$739.31	\$883.55

Rates effective July 1, 2014
District of Columbia Small Group Exchange
Appendix III-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$289.81	\$276.17	\$269.34	\$262.73	\$240.06	\$240.39
21	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
22	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
23	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
24	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
25	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
26	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
27	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
28	\$329.69	\$314.18	\$306.40	\$298.89	\$273.10	\$273.47
29	\$336.78	\$320.93	\$312.99	\$305.32	\$278.97	\$279.36
30	\$345.20	\$328.96	\$320.82	\$312.95	\$285.94	\$286.34
31	\$354.06	\$337.40	\$329.06	\$320.98	\$293.28	\$293.69
32	\$362.04	\$345.00	\$336.47	\$328.22	\$299.89	\$300.31
33	\$370.46	\$353.03	\$344.29	\$335.85	\$306.87	\$307.29
34	\$379.32	\$361.47	\$352.53	\$343.88	\$314.21	\$314.64
35	\$388.18	\$369.92	\$360.77	\$351.92	\$321.55	\$321.99
36	\$397.05	\$378.36	\$369.00	\$359.95	\$328.89	\$329.35
37	\$405.91	\$386.81	\$377.24	\$367.99	\$336.23	\$336.70
38	\$410.78	\$391.46	\$381.77	\$372.41	\$340.27	\$340.74
39	\$415.66	\$396.10	\$386.30	\$376.83	\$344.31	\$344.78
40	\$432.05	\$411.72	\$401.54	\$391.69	\$357.89	\$358.38
41	\$448.89	\$427.77	\$417.19	\$406.96	\$371.84	\$372.35
42	\$466.62	\$444.66	\$433.66	\$423.02	\$386.52	\$387.06
43	\$484.79	\$461.98	\$450.55	\$439.50	\$401.57	\$402.13
44	\$503.84	\$480.13	\$468.25	\$456.77	\$417.35	\$417.93
45	\$523.34	\$498.71	\$486.38	\$474.45	\$433.50	\$434.10
46	\$543.72	\$518.14	\$505.32	\$492.93	\$450.39	\$451.01
47	\$564.99	\$538.41	\$525.09	\$512.21	\$468.01	\$468.66
48	\$587.15	\$559.52	\$545.68	\$532.30	\$486.36	\$487.04
49	\$610.19	\$581.48	\$567.09	\$553.19	\$505.45	\$506.15
50	\$634.12	\$604.29	\$589.33	\$574.88	\$525.27	\$526.00
51	\$658.94	\$627.93	\$612.40	\$597.38	\$545.82	\$546.58
52	\$684.64	\$652.43	\$636.28	\$620.68	\$567.11	\$567.90
53	\$711.23	\$677.76	\$660.99	\$644.78	\$589.14	\$589.96
54	\$739.14	\$704.37	\$686.94	\$670.09	\$612.26	\$613.11
55	\$767.95	\$731.81	\$713.71	\$696.20	\$636.12	\$637.01
56	\$798.08	\$760.53	\$741.71	\$723.52	\$661.08	\$662.00
57	\$829.10	\$790.09	\$770.54	\$751.64	\$686.78	\$687.73
58	\$861.45	\$820.92	\$800.60	\$780.97	\$713.57	\$714.56
59	\$895.13	\$853.01	\$831.90	\$811.50	\$741.47	\$742.50
60	\$930.13	\$886.37	\$864.44	\$843.24	\$770.47	\$771.54
61	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68
62	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68
63	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68
64+	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective October 1, 2014
District of Columbia Small Group Exchange
Appendix IV-A

	1	2	3	4	5	6	7	9	10	11	12	14	15	16	17	18	19	20
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	KP DC Platinum 2720(0.00%)Pct/Deduct	KP DC Platinum 2800(0.00%)Pct/Deduct	KP DC Gold 2500(0.00%)Pct/Deduct	KP DC Gold 2600(0.00%)Pct/Deduct	KP DC Gold 2700(0.00%)Pct/Deduct	KP DC Gold 2800(0.00%)Pct/Deduct	KP DC Gold 2900(0.00%)Pct/Deduct	KP DC Silver 2500(0.00%)Pct/Deduct	KP DC Silver 2600(0.00%)Pct/Deduct	KP DC Silver 2700(0.00%)Pct/Deduct	KP DC Silver 2800(0.00%)Pct/Deduct	KP DC Bronze 2500(0.00%)Pct/Deduct	KP DC Bronze 2600(0.00%)Pct/Deduct	KP DC Bronze 2700(0.00%)Pct/Deduct	KP DC Bronze 2800(0.00%)Pct/Deduct	KP DC Bronze 2900(0.00%)Pct/Deduct	KP DC Silver 2800(0.00%)Pct/Deduct	KP DC Gold 1800(0.00%)Pct/Deduct
20 and Under	\$278.39	\$263.29	\$258.73	\$252.38	\$238.60	\$230.92	\$231.39	\$308.51	\$195.81	\$194.44	\$201.09	\$158.08	\$164.91	\$160.06	\$149.47	\$176.20	\$223.61	\$267.23
21	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
22	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
23	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
24	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
25	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
26	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
27	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
28	\$316.70	\$301.80	\$294.33	\$287.12	\$262.34	\$262.70	\$263.23	\$237.20	\$222.76	\$221.20	\$228.76	\$179.83	\$182.09	\$182.09	\$170.04	\$200.45	\$254.38	\$304.01
29	\$323.51	\$308.29	\$300.66	\$293.29	\$267.98	\$268.35	\$268.89	\$242.31	\$227.55	\$225.96	\$233.68	\$183.70	\$191.63	\$186.00	\$173.70	\$204.76	\$259.85	\$310.55
30	\$331.60	\$316.00	\$308.18	\$300.62	\$274.68	\$275.06	\$275.61	\$248.36	\$233.24	\$231.61	\$239.52	\$188.29	\$196.42	\$190.65	\$178.04	\$209.88	\$266.35	\$318.31
31	\$340.11	\$324.11	\$316.09	\$308.34	\$281.73	\$282.12	\$282.69	\$254.74	\$239.23	\$237.55	\$245.67	\$193.13	\$201.47	\$195.55	\$182.61	\$215.27	\$273.18	\$326.48
32	\$347.78	\$331.41	\$323.21	\$315.29	\$288.08	\$288.48	\$289.06	\$260.48	\$244.61	\$242.91	\$251.21	\$197.48	\$206.01	\$199.05	\$186.72	\$220.12	\$279.34	\$333.84
33	\$355.86	\$339.12	\$330.73	\$322.62	\$294.78	\$295.19	\$295.78	\$266.54	\$250.30	\$248.55	\$257.05	\$202.07	\$210.80	\$204.60	\$191.07	\$225.23	\$285.83	\$341.60
34	\$364.38	\$347.23	\$338.64	\$330.34	\$301.83	\$302.25	\$302.86	\$272.91	\$256.29	\$254.50	\$263.20	\$206.91	\$215.84	\$209.50	\$195.64	\$230.62	\$292.67	\$349.77
35	\$372.89	\$355.35	\$346.55	\$338.06	\$309.31	\$309.93	\$309.93	\$279.29	\$262.28	\$260.45	\$269.35	\$211.74	\$220.88	\$214.39	\$200.21	\$236.01	\$299.51	\$357.95
36	\$381.41	\$363.46	\$354.47	\$345.77	\$316.37	\$317.01	\$317.01	\$286.67	\$269.27	\$267.50	\$276.39	\$216.57	\$225.93	\$219.29	\$204.78	\$241.40	\$306.35	\$366.12
37	\$389.92	\$371.57	\$362.38	\$353.49	\$323.99	\$324.43	\$324.49	\$292.04	\$274.26	\$272.34	\$281.65	\$221.41	\$230.97	\$224.18	\$209.35	\$246.79	\$313.19	\$374.29
38	\$394.60	\$376.03	\$366.73	\$357.74	\$326.86	\$327.32	\$327.98	\$295.55	\$277.55	\$275.61	\$285.03	\$224.07	\$233.74	\$226.87	\$209.75	\$249.75	\$316.95	\$378.78
39	\$399.28	\$380.50	\$371.08	\$361.98	\$330.74	\$331.20	\$331.87	\$299.06	\$280.84	\$278.88	\$288.41	\$226.73	\$236.52	\$229.57	\$214.38	\$252.71	\$320.71	\$383.28
40	\$415.03	\$395.51	\$385.72	\$376.26	\$344.27	\$344.96	\$344.96	\$310.85	\$291.92	\$289.88	\$299.79	\$235.67	\$245.85	\$238.62	\$222.84	\$262.68	\$333.36	\$398.40
41	\$431.21	\$410.92	\$400.75	\$390.92	\$357.19	\$358.41	\$358.41	\$322.97	\$303.30	\$301.18	\$311.47	\$244.85	\$254.43	\$247.92	\$231.52	\$272.92	\$346.35	\$413.93
42	\$448.24	\$427.15	\$416.58	\$406.36	\$371.29	\$371.81	\$372.56	\$335.72	\$315.27	\$313.07	\$323.77	\$254.52	\$265.51	\$257.71	\$240.66	\$283.70	\$360.03	\$430.27
43	\$465.69	\$443.78	\$432.80	\$422.18	\$385.75	\$386.28	\$387.06	\$336.78	\$327.55	\$325.26	\$336.38	\$264.43	\$275.85	\$267.74	\$250.03	\$294.74	\$374.05	\$447.02
44	\$483.99	\$461.22	\$449.81	\$438.78	\$400.91	\$401.47	\$402.28	\$362.50	\$340.42	\$338.05	\$349.60	\$274.83	\$286.69	\$278.27	\$259.86	\$306.33	\$388.75	\$464.59
45	\$502.72	\$479.07	\$467.22	\$455.76	\$417.00	\$417.65	\$418.25	\$375.63	\$353.60	\$351.13	\$363.13	\$285.46	\$297.79	\$289.04	\$269.92	\$318.18	\$403.79	\$482.57
46	\$522.30	\$497.73	\$485.41	\$473.51	\$432.65	\$433.25	\$434.12	\$391.20	\$367.37	\$364.80	\$380.29	\$296.58	\$308.43	\$300.29	\$280.43	\$330.58	\$419.52	\$501.37
47	\$542.74	\$512.20	\$500.40	\$492.03	\$449.57	\$450.19	\$451.10	\$406.50	\$381.74	\$379.08	\$392.03	\$308.18	\$321.49	\$312.04	\$291.40	\$343.51	\$435.93	\$520.98
48	\$564.02	\$537.48	\$524.18	\$511.33	\$467.20	\$467.85	\$468.79	\$422.44	\$396.71	\$393.94	\$407.40	\$320.27	\$334.10	\$324.28	\$302.83	\$356.98	\$453.03	\$541.41
49	\$586.16	\$558.58	\$544.76	\$531.39	\$485.54	\$486.21	\$487.19	\$439.02	\$412.28	\$409.40	\$423.39	\$332.84	\$347.21	\$337.01	\$314.71	\$370.99	\$470.81	\$562.66
50	\$609.14	\$580.48	\$566.12	\$552.23	\$504.58	\$505.28	\$506.30	\$456.24	\$429.45	\$425.46	\$450.99	\$345.80	\$360.63	\$350.22	\$327.05	\$385.54	\$480.27	\$584.72
51	\$632.98	\$603.20	\$588.27	\$573.84	\$524.32	\$525.05	\$526.11	\$474.09	\$445.22	\$442.11	\$467.21	\$359.43	\$374.95	\$363.93	\$339.85	\$400.63	\$508.42	\$607.61
52	\$657.67	\$626.72	\$611.22	\$596.23	\$544.77	\$545.53	\$546.63	\$492.58	\$462.58	\$459.35	\$485.05	\$373.45	\$389.57	\$378.12	\$353.11	\$416.25	\$528.25	\$631.31
53	\$683.21	\$651.06	\$634.95	\$619.38	\$565.93	\$567.06	\$568.15	\$511.71	\$480.55	\$477.19	\$493.49	\$387.95	\$404.70	\$392.81	\$366.82	\$432.42	\$548.76	\$655.82
54	\$710.03	\$676.62	\$659.88	\$643.69	\$588.14	\$589.96	\$591.85	\$531.80	\$499.41	\$495.92	\$512.87	\$403.18	\$420.59	\$408.22	\$381.22	\$449.39	\$570.30	\$681.57
55	\$737.70	\$702.99	\$685.99	\$668.78	\$611.91	\$613.15	\$614.87	\$552.52	\$518.87	\$515.25	\$532.85	\$418.89	\$436.98	\$424.13	\$396.08	\$466.90	\$592.52	\$708.11
56	\$766.64	\$730.57	\$712.49	\$695.02	\$635.92	\$637.20	\$638.45	\$574.20	\$539.23	\$535.46	\$553.76	\$433.32	\$454.12	\$440.77	\$411.62	\$485.22	\$615.77	\$735.91
57	\$796.44	\$758.97	\$740.19	\$722.03	\$659.72	\$660.64	\$661.97	\$596.52	\$560.19	\$556.27	\$575.28	\$452.24	\$471.77	\$457.91	\$427.62	\$504.08	\$639.71	\$764.52
58	\$827.51	\$788.58	\$769.07	\$750.20	\$685.46	\$686.41	\$687.80	\$619.79	\$582.05	\$577.98	\$597.73	\$469.89	\$490.18	\$475.77	\$444.30	\$523.75	\$664.67	\$794.34
59	\$859.86	\$819.41	\$799.13	\$779.53	\$712.26	\$713.25	\$714.69	\$640.57	\$604.80	\$600.57	\$621.10	\$488.26	\$509.34	\$494.37	\$461.67	\$544.23	\$699.80	\$825.40
60	\$893.49	\$853.45	\$830.39	\$810.02	\$740.12	\$741.14	\$742.64	\$669.21	\$624.06	\$620.45	\$645.39	\$507.35	\$529.26	\$513.71	\$479.72	\$565.51	\$717.66	\$857.68
61	\$928.40	\$884.72	\$862.83	\$841.66	\$769.03	\$770.10	\$771.65	\$695.35	\$653.00	\$648.44	\$670.60	\$527.17	\$549.94	\$533.78	\$498.47	\$587.60	\$745.70	\$891.19
62	\$928.40	\$884.72	\$862.83	\$841.66	\$769.03	\$770.10	\$771.65	\$695.35	\$653.00	\$648.44	\$670.60	\$527.17	\$549.94	\$533.78	\$498.47	\$587.60	\$745.70	\$891.19
63	\$928.40	\$884.72	\$862.83	\$841.66	\$769.03	\$770.10	\$771.65	\$695.35	\$653.00	\$648.44	\$670.60	\$527.17	\$549.94	\$533.78	\$498.47	\$587.60	\$745.70	\$891.19
64+	\$928.40	\$884.72	\$862.83	\$841.66	\$769.03	\$770.10	\$771.65	\$695.35	\$653.00	\$648.44	\$670.60	\$527.17	\$549.94	\$533.78	\$498.47	\$587.60	\$745.70	\$891.19

Rates effective October 1, 2014
District of Columbia Small Group Exchange
Appendix IV-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$292.31	\$278.56	\$271.67	\$265.00	\$242.13	\$242.47
21	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
22	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
23	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
24	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
25	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
26	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
27	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
28	\$332.54	\$316.89	\$309.05	\$301.47	\$275.45	\$275.84
29	\$339.69	\$323.71	\$315.70	\$307.95	\$281.38	\$281.77
30	\$348.18	\$331.80	\$323.59	\$315.65	\$288.41	\$288.81
31	\$357.12	\$340.32	\$331.90	\$323.76	\$295.82	\$296.23
32	\$365.17	\$347.98	\$339.37	\$331.05	\$302.48	\$302.90
33	\$373.66	\$356.08	\$347.27	\$338.75	\$309.52	\$309.95
34	\$382.60	\$364.60	\$355.57	\$346.85	\$316.92	\$317.36
35	\$391.54	\$373.11	\$363.88	\$354.96	\$324.33	\$324.78
36	\$400.48	\$381.63	\$372.19	\$363.06	\$331.73	\$332.19
37	\$409.41	\$390.15	\$380.50	\$371.17	\$339.13	\$339.61
38	\$414.33	\$394.84	\$385.07	\$375.62	\$343.21	\$343.68
39	\$419.25	\$399.52	\$389.64	\$380.08	\$347.28	\$347.76
40	\$435.79	\$415.28	\$405.01	\$395.07	\$360.98	\$361.48
41	\$452.77	\$431.47	\$420.79	\$410.47	\$375.05	\$375.57
42	\$470.65	\$448.50	\$437.41	\$426.68	\$389.86	\$390.40
43	\$488.97	\$465.97	\$454.44	\$443.29	\$405.04	\$405.60
44	\$508.19	\$484.28	\$472.30	\$460.72	\$420.96	\$421.54
45	\$527.86	\$503.02	\$490.58	\$478.54	\$437.25	\$437.85
46	\$548.42	\$522.62	\$509.68	\$497.18	\$454.28	\$454.91
47	\$569.87	\$543.06	\$529.62	\$516.63	\$472.05	\$472.70
48	\$592.22	\$564.36	\$550.39	\$536.89	\$490.56	\$491.24
49	\$615.46	\$586.50	\$571.99	\$557.96	\$509.81	\$510.52
50	\$639.60	\$609.50	\$594.42	\$579.85	\$529.81	\$530.54
51	\$664.63	\$633.36	\$617.69	\$602.54	\$550.54	\$551.30
52	\$690.55	\$658.06	\$641.78	\$626.04	\$572.01	\$572.81
53	\$717.37	\$683.62	\$666.70	\$650.35	\$594.23	\$595.05
54	\$745.53	\$710.45	\$692.87	\$675.88	\$617.55	\$618.41
55	\$774.58	\$738.14	\$719.87	\$702.22	\$641.62	\$642.51
56	\$804.97	\$767.10	\$748.12	\$729.77	\$666.79	\$667.72
57	\$836.26	\$796.91	\$777.20	\$758.13	\$692.71	\$693.67
58	\$868.89	\$828.01	\$807.52	\$787.71	\$719.74	\$720.74
59	\$902.86	\$860.38	\$839.09	\$818.51	\$747.87	\$748.91
60	\$938.17	\$894.03	\$871.91	\$850.52	\$777.12	\$778.20
61	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60
62	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60
63	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60
64+	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

District of Columbia

2015 Small Group Rate Filing

HIOS Issuer ID 94506

HIOS Product ID 94506DC035, 94506DC036

Form Numbers DC-SG-HMO-FACE(01-14)HIX, DC-SG-POS-FACE(01-14)HIX, EOC-COVER (1-05), DC-SG-WRAP(01-14)HIX, KFHP-EOC COVER (01/10)DC, DCLG-ALL-TOC(1-05), DC-SG-SEC1(01-15)HIX, DC-SG-SEC2(01-15)HIX, DC-SG-SEC3(01-15)HIX, DC-SG-SEC4(01-14)HIX, DC-SG-SEC5(01-14)HIX, DC-SG-SEC6(01-15)HIX, DC-SG-SEC7(01-14)HIX, DC-SG-APPX-DEF(01-15)HIX, DC-SG-PLATINUM-0-20-DENTAL-HMO-COST(01-15)HIX, DC-SG-GOLD-0-20-DENTAL-HMO-COST(01-15)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-COST(01-15)HIX, DC-SG-GOLD-500-20-DENTAL-DHMO-COST(01-15)HIX, DC-SG-GOLD-1000-30-DENTALDHMO-COST(01-15)HIX, DC-SG-SILVER-1250-35-DENTALDHMO-COST(01-15)HIX, DC-SG-SILVER-2000-35-DENTALDHMO-COST(01-15)HIX, DC-SG-BRONZE-4500-50-DENTALDHMO-COST(01-15)HIX, DC-SG-GOLD-1250-10-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-GOLD-1250-0%-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-SILVER-1500-30-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-SILVER-1500-30-10%-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-BRONZE-3500-20%-HSADENTAL-HDHP-COST(01-15), DC-SG-BRONZE-4500-20-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-BRONZE-2750-40-HSADENTAL-HDHP-COST(01-15)HIX, DC-SG-BRONZE-4500-50-POSDENTAL-COST(01-15)HIX, DC-SG-GOLD-1000-30-POSDENTAL-COST(01-15)HIX, DC-SG-SILVER-2000-35-POSDENTAL-COST(01-15)HIX, DC-SG-PLATINUM-0-20-DENTALHMO-RX(01-15)HIX, DC-SG-GOLD-0-20-DENTAL-HMORX(01-15)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-RX(01-15)HIX, DC-SG-GOLD-500-20-DENTALDHMO-RX(01-15)HIX, DC-SG-GOLD-1000-30-DENTALDHMO-RX(01-15)HIX, DC-SG-SILVER-1250-35-DENTALDHMO-RX(01-15)HIX, DC-SG-SILVER-2000-35-DENTALDHMO-RX(01-15)HIX, DC-SG-BRONZE-4500-50-DENTALDHMO-RX(01-15)HIX, DC-SG-GOLD-1250-10-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-GOLD-1250-0%-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-SILVER-1500-30-10%-HSADENTAL-HDHP-RX(01-15)HIX, DC-SG-SILVER-1500-30-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-2750-40-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-3500-20%-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-4500-20-HSA-DENTAL-HDHP-RX(01-15)HIX, DC-SG-BRONZE-4500-50-POS-DENTAL-RX(01-15)HIX, DC-SG-GOLD-1000-30-POS-DENTAL-RX(01-15)HIX, DC-SG-SILVER-2000-35-POS-DENTAL-RX(01-15), DC-SG-DENTAL-ADULT(01-14)HIX, DC-SG-PED-DENTAL(01-15)HIX, DC-POS-AMEND(01-14)HIX

Actuarial Memorandum

I, Thomas Ahmann, Actuarial Director for Kaiser Foundation Health Plan, Inc. (Kaiser) am a member of the American Academy of Actuaries. I meet the qualification standards for certifying Regulatory Filings for Rates and Financial Projections for Health Plans. This Actuarial Certification applies to the attached filing for an approval of premium rates for Small Group sold on the exchange. This actuarial memorandum documents the assumptions and sources of data pertaining to the development of Kaiser premium rates effective January 2015. It is intended to comply with the requirements outlined in the DC Health Benefit Exchange Authority's *2015 Carrier Reference Manual* (March 2014, Version 1). It is not intended for any other purpose.

This rate filing applies to forms that are open to new sales and renewals. This filing does not cover grandfathered products that existed prior to March 23, 2010.

Kaiser Foundation Health Plan is an HMO company and offers traditional HMO copayment plans covering medical and pharmacy claims expenses. Kaiser also offers Deductible and High Deductible plans, some of which are HSA qualified and a limited number of Point of Service type plans. For purposes of regulation, these are all HMO products.

Kaiser Permanente will market products to the Individual and Small Group markets through Direct Sales channels and Broker arrangements, as well as on the District of Columbia Marketplace (aka the Exchange). The products are guaranteed issue and guaranteed renewable.

I am responsible for this filing. My telephone number is 510-271-6015 (Pacific time) and my email address is Thomas.M.Ahmann@kp.org.

Proposed Rate Increases

The percent increase in the Market Adjusted Index Rate from 2014 to 2015 is 8.4%. The drivers of that change are shown in the table below, which contains all the components of the Market Adjusted Index Rate calculation. The numbers shown are the ratio of the 2015 to the 2014 factor, so a 1.000 indicates no impact on the rate change.

Source of Change	2015/2014
Based Period Experience	1.059
Base Period Utilization Copay	1.002
Pricing Trend	0.999
Morbidity Adjustment	0.965
Risk Adjustment Recoveries	1.054
Pent Up Demand	1.000
Reinsurance Recoveries	1.000
Reinsurance Premium	0.995
Average Age Impact	0.996
Additional EHB	1.000
Exchange Fee	1.000
Fixed Cost Adjustment	1.014
Total Market Adjusted Index Rate Change	108.4%

Plan level rate changes are shown in row 25 of Worksheet II in the URRT. The biggest contributing factor to plan increases that vary from the Market Adjusted Index Rate change is a change in the methodology for determining the utilization copay effect in the projection period.

For 2015, Kaiser has changed its methodology to determine the utilization copay effect for its plans to better reflect the impact of member cost share. This year, along with copayments, we have considered the deductible levels as well. The result of this change impacts the plans with higher deductibles (i.e. Silver and Bronze) more than the plans with lower deductibles or just copayments (i.e. Platinum and Gold) so those plans show lower increases.

Experience Period Claims

Base period data:

The Revenue Requirement for 2015 for the new ACA plans is developed by accumulating Virginia-specific medical and administrative expenses for essential health benefits (EHB) for non-grandfathered business in the Child-Only, Conversion, Due Subsidy, Individually Medically Underwritten and Small Group lines of business incurred and paid in the period January 2013 through December 2013 including the incurred but not reported estimates for external expense. Allowed cost data from internal costs, fee for service claims, and prescription drug claims are trended to 2015. Allowed claims for internal services come directly from allocated costs while allowed claims for external expenses are calculated as incurred plus member cost sharing.

Capitations:

Kaiser Permanente has contracted with a dental provider to provide dental care to Kaiser members. Kaiser pays the provider a fixed capitation of \$1.15 PMPM to cover adult preventative. The \$1.15 PMPM is part of the base period allowed amount, shown in Exhibit 2. It is then removed as a non-Essential Health Benefit in Exhibit 3. Finally, this benefit is added back as part of the non-EHB adjustment in Exhibit 10.

Incurred Estimates on External Expense:

A common reserve tool developed and maintained by Kaiser Actuarial Services is used to set Kaiser's IBNR reserves. Kaiser's common reserve tool uses historical claim lag averages to project anticipated future payments. IBNR levels are set for line of business and service line breakouts. Note that the IBNR applies only to Kaiser's external allowed costs. Most of Kaiser's expenses are internal fixed costs, which are allocated and lag in reporting is immaterial.

The completion factors used to complete the base period external claims are taken from Kaiser's overall commercial line of business by type of service. The claims are incurred and paid in 2013 so a 12/12 completion factor is used.

Premium:

Premium was captured for calendar year 2013 for all members in the base period single (combined Small Group and Individual) pool. There were no MLR rebates for these members in this period. For Dues Subsidy members, the whole premium was captured and not just the portion paid by the member.

Part I Unified Rate Review Template

Base Period Experience:

The base period experience in Worksheet 1 Section I and in Worksheet 2 Section III is the combined experience of the Small Group and Individual markets. As required, members of Congress and their personal staffs may enroll in the exchange. No experience is included for that block of business. It is expected that the morbidity is similar to the small group pool as a whole. The Index Rate of the Experience Period in cell G17 is taken from Exhibit 1 line 3. It is the per member per month allowed claims less non-essential health benefits from the base period. Therefore, it represents the average age of the members in the risk pool. The Index Rate for the Projection period, discussed below, is taken from Exhibit 1 Line 16.

Benefit Categories:

The benefit categories in Section II of Worksheet I are mapped based on type of service and place of treatment codes. For example:

Benefit Category	Services
Inpatient Hospital	Inpatient Facility, Inpatient Visits (Rounding), Inpatient Surgery - Non Maternity, Maternity
Outpatient Hospital	Outpatient Facility, Emergency/Urgent Care, Hospital Outpatient Other Professional, Outpatient Surgery
Professional	Diagnostic Services, Office Visits, Cardiovascular, Chemotherapy/Pharmacy, Dialysis, PT/OT/ST
Other Medical	Other Services
Capitation	Adult Preventive Dental
Prescription Drug	Pharmacy

Morbidity and Other Adjustments:

The morbidity adjustment in Section II Worksheet I is developed from row (14) of Exhibit 1 and reflect the morbidity in the single risk pool (Small Group and Individual combined) of our expected 2015 membership as well as. The development of these factors along with the documentation of these assumptions is included in Exhibit 7.1-7.3.

The “Other” adjustment in Section II Worksheet I is an adjustment to reflect that family contracts are limited to three dependents in 2015.

Also included in the “Other” adjustment is the base period utilization copay effect from Exhibit 4. The adjustment is necessary to convert the base period experience from an average plan allowed amount to the allowed amount for the reference plan. “Other” also includes additional EHB benefits in the projection period.

All the factors discussed above in the Morbidity and Other Adjustments are based on Small Group and Individual experience combined.

Paid to Allowed Ratio:

The Paid to Allowed Average Factor in Projection Period in Section III of Worksheet I is an average plan factor for the plans listed in Worksheet II. It represents the change from the average benefit plan allowed amount to the average paid amount across the 2015 plans based on weightings in Worksheet 2 of the URRT.

The factor in cell v33 in Worksheet I of the URRT is calculated by weighting the plan design factors in Exhibit 10 by the projected members and allowed costs by plans in rows 81 and 100, respectively, of Worksheet II of the URRT.

Estimated Average Annual Premium per Policy:

The estimated average annual premium per policy based on the URRT and SERFF data included in the filing is \$8,184.76.

Risk Adjustment

Exhibit 7.1-7.3 documents the development of the Risk Adjustment index rate factor. The index rate is adjusted to reflect the expected change in morbidity of the members covered by these plans relative to the members in the base period data. It is also adjusted to reflect the risk adjustment receipts anticipated in the rating period based on the expect risk profile relative to the market of the Small Group line only based on DISB guidance.

Assumptions are documented regarding the current relative morbidity of Kaiser's population along with the expected morbidity of the future market relative to Kaiser. Growth assumptions for the market as a whole and Kaiser specifically are used to calculate Kaiser's 2015 expected relative morbidity to the market. This value is used to determine the expected risk adjustment impact to the market adjusted index rate.

Administrative Expense

Retention includes broker commissions, administrative expenses and capital contribution. Commissions are paid to Brokers of Record. The capital contribution is an amount to maintain and expand medical center facilities where members receive the majority of health care in the Kaiser Foundation Health Plan. As a group model HMO, Kaiser owns a significant portion of the health care delivery system. In other health care delivery models, capital contributions are included in fee for service payments, whereas for Kaiser these are funded through premium rates.

Quarterly Rate Factors

Exhibit 11 contains the quarterly rate factors that will be applied to base rates for 2nd, 3rd and 4th 2015 effective dates. These adjustments are based on an annual trend of 3.5%. Kaiser reserves the right to amend this filing with new quarterly factors based on emerging experience and other subsequent events.

In order for the Index Rate in the Projection Period in Wk1 Section III of the URRT to reflect the average quarterly rate, a weighted average trend adjustment based on the assumed distribution of renewals throughout the year has been development.

	Q1	Q2	Q3	Q4	
Members	1,401	339	409	957	
Trend	3.5%	3.5%	3.5%	3.5%	
Months	24	27	30	33	
	1.072	1.082	1.091	1.101	Proj Index Adj for Small Group
					1.013

Profit and Risk Margin

As mentioned above, the capital contribution of 1%, shown in Exhibit 9, is an amount to maintain and expand medical center facilities where members receive the majority of health care in the Kaiser Foundation Health Plan.

Taxes and Fees

Administrative expense has been adjusted to reflect the PCORI tax and the insurer tax that will apply in 2015. The amount is shown as percent in Exhibit 9.

Projected Loss Ratio

Based on a target admin percentage of 20.93%, which includes a 1% capital contribution margin, we anticipate an MLR based on federally prescribed methodology to be at least 81.07%. The MLR would be expected to be higher due to the required adjustments to both claims and premium in the prescribed methodology.

Market Adjusted Index Rate

The development of the index rate is summarized in Exhibit 1 and is based on combined experience of non-grandfathered Individual and Small Group experience as described above. The following factors along with Risk Adjustment described above have been considered in the development and are documented below.

Utilization copayment effect adjustment:

Allowed claims are grossed up for anticipated changes in the average utilization of services due to average cost sharing requirements in the base period. Member cost sharing results in lower utilization and, thus, lower allowed costs, than would otherwise occur in a zero cost share environment. An estimate based on industry standard factors has been made at the plan level to adjust our base period data to what would have been expected in a zero cost share environment in order to normalize for the utilization copayment effect. These adjustments are documented in Exhibit 4.

Demographic Adjustment:

The Demographic Adjustment shown in Exhibit 5 represents the expected change in the average member age from the base period to the projection period. Because of the lack of credible emerging experience as well as the uncertainty of the increasing mandate in 2015, we have assumed that the average age in the projection period is unchanged from the base period. However, due to slight difference in the average age between the Individual and Small group, there is a small change in the combined average age because of different growth in the Individual and Small Group members.

Embedded Pediatric Dental Adjustment:

Kaiser is embedding pediatric dental benefits into its 2015 plans. Kaiser will pay a dental provider a fixed per child per month capitation. Exhibit 14 shows the assumptions and development of the index rate adjustment factor to reflect the capitation on a per member per month basis by adjusting the index rate.

Trend:

The future trend numbers are based on actuarial judgment considering a mixture of expected industry trends, future fixed costs, and expected internalization of services. As an integrated health care provider, a large portion of Kaiser's expenses are the costs associated with providing medical care through our centers. Therefore, the projected cost that is included in our total revenue requirement is largely based on budgeting. For traditional carriers, projected claims trends are developed to project expected costs. However, given Kaiser's cost structure, Kaiser's projected claims trends fall out of the development of projected budgeted costs. For 2013 to 2015, our projected total internal annualized medical expense trend for Small Group is 3.5% and is shown in Exhibit 6 of our filing.

Alternative AV Calculations

The AV calculator does not have an option for outpatient facility copay. To calculate the impact on the actuarial value of the plan for this benefit we used the alternate method described in 156.135 (b)(2). Last year, Kaiser requested from a major actuarial consulting firm the national average allowed amount for outpatient facility costs in 2014. We have used this same data since HHS has not updated the data from last year's AV calculator. To determine AVs for plans outpatient facility copays, we propose an OP Copay Converter to be used with the AV calculator. To create this converter, we then compared the copay amount to the estimated average national OP facility allowed amount to calculate the implied coinsurance % for OP procedures. This coinsurance should only be applied to the OP facility cost and not the OP professional cost, which should be covered at 100%.

Plan designs have been changed to waive primary office visit copays for children younger than five. As the AV calculator does not have an adjustment to account for this benefit, we lowered the copay amount 16% by multiplying the actual copay by a factor of 0.84. For example, a \$20 primary office visit copay is entered as \$16.80. The 16% adjustment is based on Kaiser data (as a proxy for standard population). Primary care utilization was divided between children under five and all other members. The data showed 16% of primary care visits were attributed to children under five.

AV Pricing Values

The rates for specific plans are calculated by multiplying plan factors times the index rate. The plan factors use industry standard data in a model from a national actuarial consulting firm, calibrated to Kaiser experience to calculate the impact of the various cost share and plan elements for EHBs, including utilization copayment effect.

The reference plan used as the basis for the AV pricing values is a \$0 cost share plan valued using the same industry standard factors described above.

Exhibit 9 indicates the portion of the AV Pricing Value that is attributable to each of the allowable modifiers to the Index Rate. The plan factor shown in Exhibit 9 reflects both member cost shares and the resulting dampening of expected utilization due to those cost shares.

Network Adjustment

Kaiser provides services to its members in its Signature network in its medical offices and externally with contracted providers. Kaiser offers an expanded network of contracted non-Kaiser physicians in its Select network. Rates for products with the Select network are adjusted by a factor of 1.05 for HMO to reflect the additional cost. This adjustment is consistent with the factor already filed in prior filings. For the POS plans, the factor is 1.04, reflecting steerage of 80% for Tier 1.

Age Factors

The age factor table used to develop age specific rates is the standard table provided by DISB.

Exhibit 12 shows the development of the age calibration factor. This factor is new to the methodology in 2015. The development starts with the average age in the projection period from Exhibit 5. That age is rounded to the nearest age and the age factor is pulled from the DISB age curve. As described in the Actuarial Memorandum instructions, the ratio of the age factor for the nearest rounded age to the age factor for the average age in the projection period is the age calibration factor used in the rate development.

Non-EHB

An adjustment has been made to the base period allowed amount to remove the Non-EHB benefits from the Index Rate. This multiplier was calculated by summing the allowed amount for Non-EHB benefits in the base period and adding the adult preventive dental capitation and then dividing by total allowed.

Additional URRT Items

Membership Projections:

The total membership projection included across new plans in Section II of Worksheet 2 is consistent with Kaiser's business plan. Detailed assumptions are presented and documented in Exhibit 7.1-7.3.

An assumption is made in Worksheet 2 as to the distribution of members by product based on Kaiser's expected distribution of membership by metal level.

Terminated Plans:

The following non-grandfathered plans are included in the "Terminate Plans" column in Worksheet 2 of the URRT.

DC Added Choice POS Plan 1 (\$5/\$10)
DC Added Choice POS Plan 2 (\$15/\$25)
DC DHMO Plan 1 (\$10/\$20/\$250 Ded - 90%)
DC DHMO Plan 2 (\$15/\$25/\$500 Ded - 90%)
DC DHMO Plan 3 (\$25/\$35/\$2,000 Ded - 80%)
DC DHMO Plan 4 (\$25/\$35/\$1000 Ded - 80%)
DC Flex Choice Plan 1 (100/90/70 - \$10-\$20 OV)
DC Flex Choice Plan 2 (100/80/60 - \$15-\$25 OV)
DC Flex Choice Plan 3 (100/70/50 - \$25-\$35 OV)
DC Flex Choice Plan 4 (100/80/60 - \$10-\$25 OV)
DC HDHP Plan 1 (\$1,250 Ded - 80%)
DC HDHP Plan 2 (\$1,750 Ded - 70%)

DC HDHP Plan 3 (\$2,250 Ded – 70%)
 DC HDHP Plan 4 (\$1,250 Ded - 100%)
 DC HDHP Plan 5 (\$2,250 Ded - 100%)
 DC HDHP Plan 8 (\$2,800 Ded - 100%)
 DC HMO Plan 1 (\$5/\$10/\$0 IP/\$0 Rx Ded)
 DC HMO Plan 2 (\$10/\$20/\$0 IP/\$0 Rx Ded)
 DC HMO Plan 3 (\$15/\$25/\$0 IP/\$0 Rx Ded)
 DC HMO Plan 4 (\$15/\$30/\$500 IP/\$0 Rx Ded)
 DC HMO Plan 5 (\$20/\$30/\$250 IP/\$0 Rx Ded)
 DC HMO Plan 6 (\$20/\$40/20% IP/\$0 Rx Ded)
 DC HMO Plan 7 (\$10/\$10/\$250 IP/\$0 Rx Ded)
 DC HMO Plan 8 (\$20/\$20/\$500 IP/\$0 Rx Ded)

Warning Alert:

There are no warning alerts in Wk2 of the URRT

Summary Rate Calculation

Exhibit 1 shows the development of the Market Adjusted Index Rate from the base period Medical Cost Data. The Plan Adjusted Index Rates are calculated using the Market Adjusted Index Rate and the allowable plan adjustment factors in Exhibit 9. The final 2015 Consumer Adjusted Premium Rates are developed by applying the age slope and age calibration to the Plan Adjusted Index Rates to generate age specific rates.

Exhibit Table of Contents:

The following exhibits are included in this filing:

- Exhibit 1 – Market Adjusted Index Rate Calculation
- Exhibit 2 –Allowed Claims Development
- Exhibit 3 –Non-EHB Adjustments
- Exhibit 4 – Utilization Copayment Effect Adjustments
- Exhibit 5 – Demographic Adjustment
- Exhibit 6 – Trend Factor
- Exhibits 7.1 - Risk Adjustment and Morbidity Development – Combined Small and Individual
- Exhibits 7.2 - Risk Adjustment and Morbidity Development – Individual Line of Business
- Exhibits 7.3 - Risk Adjustment and Morbidity Development – Small Group Line of Business
- Exhibit 8 – Administrative Expense
- Exhibit 9 – Plan Adjusted Index Rates Development
- Exhibit 10 – AV Calculator Values
- Exhibit 11 – Quarterly Rate Factors
- Exhibit 12 – Age Calibration
- Exhibit 13 – Age Factors
- Exhibit 14 – Pediatric Dental Adjustment Factor
- Appendix I-A - 1st Quarter 2014 Signature Network Rate Sheet
- Appendix I-B - 1st Quarter 2014 Select Network Rate Sheet
- Appendix II-A - 2nd Quarter 2014 Signature Network Rate Sheet
- Appendix II-B - 2nd Quarter 2014 Select Network Rate Sheet
- Appendix III-A - 3rd Quarter 2014 Signature Network Rate Sheet
- Appendix III-B - 3rd Quarter 2014 Select Network Rate Sheet
- Appendix IV-A - 4th Quarter 2014 Signature Network Rate Sheet
- Appendix IV-B - 4th Quarter 2014 Select Network Rate Sheet

Certification

This filing is in conformity with all applicable Actuarial Standards of Practice, including ASOP No. 8. To the best of my knowledge, the rating methodologies of Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. and the development of the Index Rate comply with the applicable District and Federal Statutes and Regulations (45 CFR 156.80(d)(1)). The percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV were calculated in accordance with actuarial standards of practice. The index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates. The rating methodologies produce premiums that are reasonable in relation to benefits being provided and the populations being covered and are based on sound and commonly accepted actuarial principles and are neither excessive nor deficient.



Thomas Ahmann, FSA, MAAA
Actuarial Director
Kaiser Foundation Health Plan, Inc.
6/13/2014

**Index Rate Development
Summary Index Rate Calculation
Exhibit 1**

				<u>Source</u>
(1)	Base Period Allowed	\$333.14	Exhibit 2	
(2)	Non-EHB Claims Adjustment	0.9873	Exhibit 3	
(5)	Adjusted Base Period Allowed	\$328.92	(1) * (2)	
(6)	Base Period Utilization Adjustment	1.088	Exhibit 4	
(7)	Projection Period Utilization Adjustment	0.908		
(8)	Demographic Adjustment	0.996	Exhibit 5	
(9)	Product/Network Moribidty Adjustment	1.000	Exhibit 2	
(10)	Additional EHB (including Ped Dental)	1.01149	Exhibit 14	
(10)	Annualized Trend	3.5%	Exhibit 6	
(11)	Months of Trend	24		
(12)	Trend Factor	1.071	$\{1 + (10)\} ^ \{ (11) / 12 \}$	
(14)	Change in Morbidity	1.050	Exhibit 7	
(15)	Contract Limit of 3 Children Factor	1.005		
(16)	Combined Projection Period Index Rate Prior to Separate Modifiers	369.70	(5) * (6) * (7) * (8) * (9) * (10) * (12) * (13) * (14) * (15)	
(17)	Risk Adjustment	0.956	Exhibit 7	
(18)	Exchange fee	1.0000		
(19)	Reinsurance Premium	1.0104		
(20)	Market Adjusted Index Rate	\$357.14	(16) * (17) * (18) * (19)	

Allowed Claims Development
Exhibit 2

Current Pool	Current Plans	Member Months	Total
Individual	All	12,279	\$304.86
Small Group	All	34,212	\$343.29
Grand Total		46,491	\$333.14

Non-EHB Adjustments
Exhibit 3

Current Pool	Current Plans	Member Months	Non-EHB PMPM
Individual	All	12,279	\$4.06
Small Group	All	34,212	\$4.28
Grand Total		46,491	\$4.22

Multiplier to Remove Non-EHB [1 - (Non-EHB PMPM / Allowed PMPM)]	0.9873
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Utilization Copayment Effect Adjustment
Exhibit 4

Current Pool	Current Plan	Member Months	Allowed Amount	Copay Impact
Individual	All	12,279	\$304.86	0.897
Small Group	All	34,212	\$343.29	0.927
Grand Total		46,491	\$333.14	0.919

Adjustment Factor is the Inverse of the Total	1.088
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**Demographic Adjustment
Exhibit 5**

		Member Months	Average Age Factor ¹	Weighed Average Age ²
Experience Period	Individual	12279	1.0571	42.1
	Small Group	34212	1.0897	42.9
	Combined	46491	1.0811	42.7
Projection Period	Individual	24933	1.0571	42.1
	Small Group	37260	1.0897	42.9
	Combined	62193	1.0766	42.6
Demographic Factor			0.9959	

¹ Average age factor based on CMS Age curve

² Weighted Average Age = Interpolation on age curve of average age factor

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Exhibit 6
Trend Calculation

Category	Weight	2013 to 2015 Annualized Trend
Hospital	14.8%	4.5%
Physician Internal	22.8%	4.0%
Referral	3.6%	4.5%
Rx	15.4%	4.5%
Other	43.5%	2.5%
Composite	100.0%	3.5%

Risk Adjustment and Morbidity Development
Exhibit 7.1

Development of Risk Adjustment Factor Applied to Index Rate

	<u>Small</u>	<u>Individual</u>	<u>Total</u>
Average Members	3,105	2,078	5,183
Adjustment for change in risk in Kaiser membership	99.6%	113.0%	105.0%
Adjustment for risk adjustment recoveries	95.6%	92.2%	

Risk Adjustment and Morbidity Development
Exhibit 7.2

Current Risk Profile of Non-Grandfathered Kaiser members relative to current market

	<u>CY 2013 Member Months</u>	<u>Morbidity</u>
(1) Non-Grandfathered Guaranteed Issue	108	1.468
(2) Non-Grandfathered Medically Underwritten	11,667	0.977
(3) Dues Subsidy	504	1.115
(4) Total	12,279	0.987

Impact of projected membership to Kaiser risk profile in 2015 relative to current market

	<u>Member Months</u>	<u>Morbidity</u>
(5) Current Members [from (4) above]	12,279	0.987
(6) Gender to Unisex Selection Adjustment	11,667	1.100
(7) Total Morbidity Change	12,279	1.081
(8) New Entrants previously uninsured	6,327	1.300
(9) Transfers from other carriers or other KP Segments	6,327	1.000
(10) Subtotal	24,933	1.116

Impact to Current Market from all new entrants in 2015

	<u>Member Months</u>	<u>Risk Relativity</u>
(11) Current Market	211,205	1.000
(12) Uninsured New Entrants	25,246	1.300
(13) Transfers from Group	25,246	1.000
(14) 2015 Market	261,697	1.029
(15) Kaiser risk relativity to 2015 market [(10) / (14)]		1.085
(16) Pent Up Demand Factor for New Entrants		1.000
(17) Adjustment for change in risk in Kaiser membership [(10) / (4)]		113.0%
(18) Adjustment for risk adjustment recoveries [1 / (15)]		92.2%
(19) Adjustment for Pent Up Demand [{ (8) mems * (16) + (5) mems + (9) mems } / (10) mems }]		100.0%

**Risk Adjustment Factor
Exhibit 7.3**

Current Risk Profile of Non-Grandfathered Kaiser members relative to current market

	<u>CY 2013 Member Months</u>	<u>Morbidity</u>
(1) Non-Grandfathered ¹	34,212	1.050

Impact of projected membership to Kaiser risk profile in 2015 relative to current market

	<u>Members Months</u>	<u>Morbidity</u>
(2) Current Members [from (4) above]	34,212	1.050
(3) New to Kaiser	3,048	1.000
(4) Subtotal	37,260	1.046

	<u>Member Months</u>	
(5) 2015 Market	568,490	1.000
(6) Kaiser risk relativity to 2015 market [(4) / (5)]		1.046

Development of Risk Adjustment Factor Applied to Index Rate

(7) Adjustment for change in risk in Kaiser membership [(4) / (1)]	99.6%
(8) Adjustment for risk adjustment recoveries [1 / (6)]	95.6%
(9) Total Adjustment [(7) * (8)]	95.2%

¹ Current Kaiser portfolio is expected to be 1.05 to market.

Administrative Expense Factor - Small Group
Exhibit 8

Retention Category	Percent of Retention
Claims Processing	0.76%
Customer Service	1.60%
Taxes	2.87%
Capital Contribution	1.00%
Member Satisfaction Survey	0.17%
Member Communication Materials	0.41%
Open Enrollment	0.41%
Utilization Review	0.52%
Care Management	0.78%
Ad Hoc Reports	0.25%
Other - Community Service	0.30%
Corporate and Other Overhead	5.85%
Commissions	6.00%
Total	20.93%

Plan Adjusted Index Rates
Exhibit 9

Plans	Metallic Level	Name	Allowable Plan Modifiers					Plan Adjusted Index Rate
			Plan Design	Network Factor	Utilization Copay Effect	Non-EHB	Admin	
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	0.958	1.000	0.9250	1.0126	1.2646	446.61
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	0.893	1.000	0.9455	1.0126	1.2646	425.60
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	0.916	1.000	0.8990	1.0126	1.2646	415.07
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	0.866	1.000	0.9277	1.0126	1.2646	404.89
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	0.812	1.000	0.9046	1.0126	1.2646	369.95
6	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental	0.810	1.000	0.9073	1.0126	1.2646	370.46
7	Gold	KP DC Gold 1250/10/HSA/Dental/Ped Dental	0.810	1.000	0.9099	1.0126	1.2646	371.21
9	Silver	KP DC Silver 1250/35/Dental/Ped Dental	0.752	1.000	0.8831	1.0126	1.2646	334.50
10	Silver	KP DC Silver 2000/35/Dental/Ped Dental	0.717	1.000	0.8694	1.0126	1.2646	314.13
11	Silver	KP DC Silver 1500/30/20%/HSA/Dental/Ped Dental	0.722	1.000	0.8573	1.0126	1.2646	311.94
12	Silver	KP DC Silver 1500/30/10%/HSA/Dental/Ped Dental	0.741	1.000	0.8637	1.0126	1.2646	322.59
14	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	0.627	1.000	0.8027	1.0126	1.2646	253.60
15	Bronze	KP DC Bronze 2750/40/30%/HSA/Dental/Ped Dental	0.639	1.000	0.8211	1.0126	1.2646	264.55
16	Bronze	KP DC Bronze 3500/20%/HSA/Dental/Ped Dental	0.628	1.000	0.8114	1.0126	1.2646	256.77
17	Bronze	KP DC Bronze 4500/20/HSA/Dental/Ped Dental	0.605	1.000	0.7868	1.0126	1.2646	239.79
18	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	0.688	1.000	0.8158	1.0126	1.2646	282.67
19	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	0.816	1.000	0.8727	1.0126	1.2646	358.72
20	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	0.928	1.000	0.9169	1.0126	1.2646	428.71
21	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	0.958	1.050	0.9250	1.0126	1.2646	468.94
22	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	0.893	1.050	0.9455	1.0126	1.2646	446.88
23	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	0.916	1.050	0.8990	1.0126	1.2646	435.82
24	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	0.866	1.050	0.9277	1.0126	1.2646	425.13
25	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	0.812	1.050	0.9046	1.0126	1.2646	388.44
26	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel	0.810	1.050	0.9073	1.0126	1.2646	388.98

AV Calculator Values
Exhibit 10

Plans	Metallic Level	Name	AV Value
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	0.904
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	0.885
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	0.818
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	0.816
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	0.783
6	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental	0.781
7	Gold	KP DC Gold 1250/10/HSA/Dental/Ped Dental	0.809
9	Silver	KP DC Silver 1250/35/Dental/Ped Dental	0.716
10	Silver	KP DC Silver 2000/35/Dental/Ped Dental	0.699
11	Silver	KP DC Silver 1500/30/20%/HSA/Dental/Ped Dental	0.685
12	Silver	KP DC Silver 1500/30/10%/HSA/Dental/Ped Dental	0.696
14	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	0.616
15	Bronze	KP DC Bronze 2750/40/30%/HSA/Dental/Ped Dental	0.620
16	Bronze	KP DC Bronze 3500/20%/HSA/Dental/Ped Dental	0.609
17	Bronze	KP DC Bronze 4500/20/HSA/Dental/Ped Dental	0.593
18	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	0.616
19	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	0.699
20	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	0.783
21	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	0.904
22	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	0.885
23	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	0.818
24	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	0.816
25	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	0.783
26	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel	0.781

Quarterly Rate Factors
Exhibit 11

Plans	Metallic Level	Name	2Q 2014	3 Q 2014	4 Q 2014
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	1.009	1.017	1.026
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	1.009	1.017	1.026
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	1.009	1.017	1.026
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	1.009	1.017	1.026
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	1.009	1.017	1.026
6	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental	1.009	1.017	1.026
7	Gold	KP DC Gold 1250/10/HSA/Dental/Ped Dental	1.009	1.017	1.026
9	Silver	KP DC Silver 1250/35/Dental/Ped Dental	1.009	1.017	1.026
10	Silver	KP DC Silver 2000/35/Dental/Ped Dental	1.009	1.017	1.026
11	Silver	KP DC Silver 1500/30/20%/HSA/Dental/Ped Dental	1.009	1.017	1.026
12	Silver	KP DC Silver 1500/30/10%/HSA/Dental/Ped Dental	1.009	1.017	1.026
14	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	1.009	1.017	1.026
15	Bronze	KP DC Bronze 2750/40/30%/HSA/Dental/Ped Dental	1.009	1.017	1.026
16	Bronze	KP DC Bronze 3500/20%/HSA/Dental/Ped Dental	1.009	1.017	1.026
17	Bronze	KP DC Bronze 4500/20/HSA/Dental/Ped Dental	1.009	1.017	1.026
18	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	1.009	1.017	1.026
19	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	1.009	1.017	1.026
20	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	1.009	1.017	1.026
21	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
22	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
23	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
24	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
25	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	1.009	1.017	1.026
26	Gold	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel	1.009	1.017	1.026

Age Calibration Factor
Exhibit 12

	<u>Weighted Average Age</u>	<u>Age Factor</u>
Average Age in the Projection Period	42.6	1.077
Nearest Rounded Age	43.0	1.094
Calibration Factor		1.016

Age Factors
Exhibit 13

Age	Age Slope	Age Factor Indexed to Age 21
20	0.654	0.90
21	0.727	1.00
22	0.727	1.00
23	0.727	1.00
24	0.727	1.00
25	0.727	1.00
26	0.727	1.00
27	0.727	1.00
28	0.744	1.02
29	0.76	1.05
30	0.779	1.07
31	0.799	1.10
32	0.817	1.12
33	0.836	1.15
34	0.856	1.18
35	0.876	1.20
36	0.896	1.23
37	0.916	1.26
38	0.927	1.28
39	0.938	1.29
40	0.975	1.34
41	1.013	1.39
42	1.053	1.45
43	1.094	1.50
44	1.137	1.56
45	1.181	1.62
46	1.227	1.69
47	1.275	1.75
48	1.325	1.82
49	1.377	1.89
50	1.431	1.97
51	1.487	2.05
52	1.545	2.13
53	1.605	2.21
54	1.668	2.29
55	1.733	2.38
56	1.801	2.48
57	1.871	2.57
58	1.944	2.67
59	2.02	2.78
60	2.099	2.89
61	2.181	3.00
62	2.181	3.00
63	2.181	3.00
64+	2.181	3.00

Pediatric Dental Factor Development
Exhibit 14

Current Pool	Current Plan	Member Months	Ped Dental Factor
Individual	All	12,279	1.007
Small Group	All	34,212	1.013
Grand Total		46,491	1.011

	40 Yr Old Silver Without Load	40 Yr Old Silver With Load	Ped Dental PMPM
Individual	250.61	253.48	1.79
Small Group	281.29	284.49	3.59
Grand Total	273.18	276.30	3.11

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective January 1, 2014
District of Columbia Small Group Exchange
Appendix I-A

[illegible]

Rates effective January 1, 2014
District of Columbia Small Group Exchange
Appendix I-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$284.87	\$271.46	\$264.75	\$258.25	\$235.97	\$236.29
21	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
22	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
23	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
24	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
25	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
26	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
27	\$316.66	\$301.76	\$294.30	\$287.08	\$262.30	\$262.67
28	\$324.07	\$308.82	\$301.18	\$293.79	\$268.44	\$268.81
29	\$331.04	\$315.46	\$307.66	\$300.11	\$274.21	\$274.59
30	\$339.31	\$323.35	\$315.35	\$307.61	\$281.07	\$281.46
31	\$348.02	\$331.65	\$323.44	\$315.51	\$288.28	\$288.68
32	\$355.86	\$339.12	\$330.73	\$322.62	\$294.78	\$295.19
33	\$364.14	\$347.01	\$338.42	\$330.12	\$301.63	\$302.05
34	\$372.85	\$355.31	\$346.52	\$338.02	\$308.85	\$309.28
35	\$381.56	\$363.61	\$354.61	\$345.92	\$316.06	\$316.50
36	\$390.28	\$371.91	\$362.71	\$353.81	\$323.28	\$323.73
37	\$398.99	\$380.21	\$370.81	\$361.71	\$330.50	\$330.96
38	\$403.78	\$384.78	\$375.26	\$366.06	\$334.47	\$334.93
39	\$408.57	\$389.35	\$379.71	\$370.40	\$338.43	\$338.90
40	\$424.69	\$404.70	\$394.69	\$385.01	\$351.78	\$352.27
41	\$441.24	\$420.48	\$410.07	\$400.02	\$365.49	\$366.00
42	\$458.66	\$437.08	\$426.27	\$415.81	\$379.93	\$380.45
43	\$476.52	\$454.10	\$442.86	\$432.00	\$394.72	\$395.27
44	\$495.25	\$471.95	\$460.27	\$448.98	\$410.23	\$410.80
45	\$514.41	\$490.21	\$478.08	\$466.36	\$426.11	\$426.70
46	\$534.45	\$509.30	\$496.70	\$484.52	\$442.71	\$443.32
47	\$555.36	\$529.23	\$516.13	\$503.47	\$460.03	\$460.66
48	\$577.14	\$549.98	\$536.37	\$523.22	\$478.07	\$478.73
49	\$599.79	\$571.57	\$557.42	\$543.75	\$496.83	\$497.52
50	\$623.31	\$593.98	\$579.28	\$565.08	\$516.31	\$517.03
51	\$647.70	\$617.22	\$601.95	\$587.19	\$536.52	\$537.26
52	\$672.96	\$641.30	\$625.43	\$610.09	\$557.44	\$558.22
53	\$699.10	\$666.20	\$649.72	\$633.79	\$579.09	\$579.90
54	\$726.54	\$692.35	\$675.22	\$658.66	\$601.82	\$602.66
55	\$754.85	\$719.33	\$701.54	\$684.33	\$625.27	\$626.14
56	\$784.47	\$747.56	\$729.06	\$711.18	\$649.81	\$650.71
57	\$814.96	\$776.62	\$757.40	\$738.82	\$675.06	\$676.00
58	\$846.76	\$806.92	\$786.95	\$767.65	\$701.40	\$702.38
59	\$879.86	\$838.46	\$817.72	\$797.66	\$728.82	\$729.84
60	\$914.27	\$871.25	\$849.70	\$828.86	\$757.33	\$758.38
61	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01
62	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01
63	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01
64+	\$949.99	\$905.29	\$882.89	\$861.24	\$786.91	\$788.01

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective April 1, 2014
District of Columbia Small Group Exchange

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold	
Year	KP DC Platinum 2000	DC Platinum 2000	KP DC Platinum 2000	DC Platinum 2000	KP DC Gold 2000	DC Gold 2000	KP DC Gold 2000	DC Silver 2000	DC Silver 2000	DC Silver 2000	DC Silver 2000	KP DC Silver 2000	DC Bronze 2000	DC Bronze 2000	DC Bronze 2000	DC Bronze 2000	DC Bronze 2000	KP DC Silver 2000	KP DC Gold 2000	
20 Under	\$273.64	\$260.77	\$254.32	\$248.08	\$235.97	\$229.99	\$227.44	\$204.95	\$192.47	\$191.13	\$197.66	\$155.38	\$162.09	\$157.33	\$174.89	\$163.32	\$192.53	\$219.79	\$262.68	
21	\$304.19	\$289.88	\$282.70	\$275.77	\$262.81	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$180.19	\$174.89	\$163.32	\$192.53	\$219.79	\$262.68	\$292.00	
22	\$304.19	\$289.88	\$282.70	\$275.77	\$262.81	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$180.19	\$174.89	\$163.32	\$192.53	\$219.79	\$262.68	\$292.00	
23	\$304.19	\$289.88	\$282.70	\$275.77	\$262.81	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$180.19	\$174.89	\$163.32	\$192.53	\$219.79	\$262.68	\$292.00	
24	\$304.19	\$289.88	\$282.70	\$275.77	\$262.81	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$180.19	\$174.89	\$163.32	\$192.53	\$219.79	\$262.68	\$292.00	
25	\$304.19	\$289.88	\$282.70	\$275.77	\$262.81	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$180.19	\$174.89	\$163.32	\$192.53	\$219.79	\$262.68	\$292.00	
26	\$304.19	\$289.88	\$282.70	\$275.77	\$262.81	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$180.19	\$174.89	\$163.32	\$192.53	\$219.79	\$262.68	\$292.00	
27	\$304.19	\$289.88	\$282.70	\$275.77	\$262.81	\$252.32	\$252.83	\$227.83	\$213.96	\$212.46	\$219.72	\$172.73	\$180.19	\$174.89	\$163.32	\$192.53	\$219.79	\$262.68	\$292.00	
28	\$311.30	\$296.65	\$289.31	\$282.22	\$257.86	\$248.22	\$258.74	\$233.16	\$218.96	\$217.43	\$224.86	\$176.77	\$184.40	\$178.98	\$167.14	\$197.03	\$250.04	\$298.82	\$350.42	
29	\$318.00	\$303.03	\$295.54	\$286.31	\$263.17	\$250.78	\$261.78	\$238.17	\$223.11	\$229.69	\$237.66	\$185.08	\$193.07	\$187.40	\$175.00	\$206.30	\$261.80	\$312.88	\$368.00	
30	\$325.95	\$310.61	\$302.92	\$295.50	\$269.99	\$250.77	\$270.91	\$243.13	\$229.26	\$227.66	\$235.44	\$185.08	\$193.07	\$187.40	\$175.00	\$206.30	\$261.80	\$312.88	\$368.00	
31	\$334.58	\$310.70	\$303.18	\$295.88	\$270.91	\$250.77	\$270.91	\$243.13	\$229.26	\$227.66	\$235.44	\$185.08	\$193.07	\$187.40	\$175.00	\$206.30	\$261.80	\$312.88	\$368.00	
32	\$341.85	\$307.92	\$300.91	\$293.17	\$268.17	\$250.77	\$270.91	\$243.13	\$229.26	\$227.66	\$235.44	\$185.08	\$193.07	\$187.40	\$175.00	\$206.30	\$261.80	\$312.88	\$368.00	
33	\$349.80	\$333.34	\$325.09	\$317.12	\$280.75	\$260.15	\$290.74	\$260.19	\$246.03	\$244.32	\$252.66	\$198.63	\$207.20	\$201.11	\$187.81	\$221.39	\$280.96	\$335.78	\$398.00	
34	\$358.16	\$341.31	\$332.87	\$324.70	\$296.68	\$276.09	\$297.09	\$268.26	\$251.92	\$250.16	\$258.71	\$203.38	\$212.16	\$206.92	\$192.30	\$226.69	\$287.68	\$343.81	\$408.00	
35	\$366.29	\$340.64	\$332.29	\$324.06	\$298.04	\$276.09	\$297.09	\$268.26	\$251.92	\$250.16	\$258.71	\$203.38	\$212.16	\$206.92	\$192.30	\$226.69	\$287.68	\$343.81	\$408.00	
36	\$374.90	\$357.26	\$348.42	\$339.88	\$310.55	\$301.08	\$311.60	\$280.79	\$263.69	\$261.85	\$270.80	\$212.88	\$222.07	\$221.55	\$201.29	\$237.28	\$301.12	\$359.87	\$426.00	
37	\$383.27	\$356.20	\$347.46	\$338.56	\$317.92	\$308.58	\$318.56	\$287.06	\$269.58	\$267.70	\$276.84	\$220.36	\$227.03	\$226.58	\$205.78	\$242.58	\$307.85	\$367.91	\$437.00	
38	\$387.87	\$369.62	\$360.48	\$351.64	\$321.29	\$313.74	\$322.39	\$292.07	\$272.82	\$270.91	\$280.17	\$220.25	\$227.76	\$227.00	\$208.25	\$245.49	\$311.54	\$372.32	\$437.00	
39	\$392.47	\$374.01	\$364.75	\$355.81	\$325.55	\$318.15	\$327.12	\$297.96	\$278.41	\$276.45	\$286.61	\$221.42	\$227.81	\$227.00	\$208.25	\$245.49	\$311.54	\$372.32	\$437.00	
40	\$407.96	\$388.76	\$379.14	\$369.84	\$337.93	\$330.40	\$339.38	\$305.55	\$286.94	\$286.94	\$298.04	\$231.65	\$234.65	\$234.55	\$219.04	\$258.20	\$327.67	\$391.60	\$467.00	
41	\$423.86	\$403.91	\$393.92	\$384.26	\$351.10	\$351.58	\$351.58	\$332.29	\$317.46	\$316.48	\$326.04	\$240.68	\$251.07	\$251.07	\$234.69	\$272.57	\$340.45	\$406.87	\$482.00	
42	\$440.59	\$419.86	\$409.47	\$399.63	\$366.96	\$366.96	\$366.96	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
43	\$457.75	\$437.21	\$425.42	\$414.08	\$379.78	\$379.78	\$379.78	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
44	\$475.74	\$453.36	\$442.14	\$431.29	\$394.07	\$394.07	\$394.07	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
45	\$494.15	\$470.90	\$459.25	\$447.98	\$406.32	\$406.32	\$406.32	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
46	\$513.40	\$489.24	\$477.14	\$465.43	\$425.27	\$425.27	\$425.27	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
47	\$533.48	\$500.38	\$485.60	\$471.90	\$431.64	\$431.64	\$431.64	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
48	\$554.40	\$528.32	\$515.24	\$502.61	\$459.87	\$459.87	\$459.87	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
49	\$576.16	\$549.05	\$535.47	\$522.33	\$477.26	\$477.26	\$477.26	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
50	\$598.75	\$570.58	\$556.46	\$542.82	\$497.66	\$497.66	\$497.66	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
51	\$622.91	\$592.74	\$578.24	\$564.06	\$518.24	\$518.24	\$518.24	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
52	\$646.45	\$616.04	\$600.79	\$586.06	\$535.48	\$535.48	\$535.48	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
53	\$671.56	\$642.13	\$626.82	\$608.82	\$556.28	\$556.28	\$556.28	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
54	\$697.92	\$666.08	\$648.62	\$632.72	\$578.11	\$578.11	\$578.11	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
55	\$725.15	\$691.09	\$673.90	\$657.17	\$603.77	\$603.77	\$603.77	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
56	\$753.57	\$718.11	\$700.34	\$682.58	\$626.34	\$626.34	\$626.34	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
57	\$782.86	\$749.02	\$727.56	\$709.77	\$648.47	\$648.47	\$648.47	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
58	\$813.40	\$775.13	\$755.95	\$737.41	\$670.77	\$670.77	\$670.77	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
59	\$845.20	\$805.43	\$785.50	\$766.24	\$700.25	\$700.25	\$700.25	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
60	\$878.26	\$836.93	\$816.23	\$796.21	\$727.49	\$727.49	\$727.49	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
61	\$912.57	\$869.63	\$848.11	\$827.31	\$756.96	\$756.96	\$756.96	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
62	\$912.57	\$869.63	\$848.11	\$827.31	\$756.96	\$756.96	\$756.96	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
63	\$912.57	\$869.63	\$848.11	\$827.31	\$756.96	\$756.96	\$756.96	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	
64	\$912.57	\$869.63	\$848.11	\$827.31	\$756.96	\$756.96	\$756.96	\$330.00	\$309.90	\$307.73	\$318.25	\$250.18	\$260.99	\$260.99	\$252.32	\$278.66	\$335.89	\$422.93	\$500.00	

Rates effective April 1, 2014
District of Columbia Small Group Exchange
Appendix II-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$287.33	\$273.81	\$267.03	\$260.48	\$238.00	\$238.33
21	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
22	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
23	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
24	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
25	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
26	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
27	\$319.40	\$304.37	\$296.84	\$289.56	\$264.57	\$264.94
28	\$326.87	\$311.49	\$303.78	\$296.33	\$270.76	\$271.13
29	\$333.90	\$318.19	\$310.31	\$302.70	\$276.58	\$276.96
30	\$342.24	\$326.14	\$318.07	\$310.27	\$283.49	\$283.89
31	\$351.03	\$334.51	\$326.24	\$318.24	\$290.77	\$291.18
32	\$358.94	\$342.05	\$333.59	\$325.41	\$297.32	\$297.74
33	\$367.29	\$350.00	\$341.34	\$332.97	\$304.24	\$304.66
34	\$376.07	\$358.38	\$349.51	\$340.94	\$311.52	\$311.95
35	\$384.86	\$366.75	\$357.68	\$348.90	\$318.79	\$319.24
36	\$393.65	\$375.12	\$365.84	\$356.87	\$326.07	\$326.53
37	\$402.43	\$383.50	\$374.01	\$364.84	\$333.35	\$333.81
38	\$407.27	\$388.10	\$378.50	\$369.22	\$337.35	\$337.82
39	\$412.10	\$392.71	\$382.99	\$373.60	\$341.36	\$341.83
40	\$428.35	\$408.20	\$398.10	\$388.34	\$354.82	\$355.32
41	\$445.05	\$424.11	\$413.61	\$403.47	\$368.65	\$369.16
42	\$462.62	\$440.85	\$429.95	\$419.40	\$383.21	\$383.74
43	\$480.63	\$458.02	\$446.69	\$435.73	\$398.13	\$398.68
44	\$499.53	\$476.02	\$464.24	\$452.86	\$413.78	\$414.35
45	\$518.86	\$494.44	\$482.21	\$470.38	\$429.79	\$430.39
46	\$539.07	\$513.70	\$500.99	\$488.71	\$446.53	\$447.15
47	\$560.15	\$533.80	\$520.59	\$507.82	\$464.00	\$464.64
48	\$582.12	\$554.73	\$541.01	\$527.74	\$482.20	\$482.86
49	\$604.97	\$576.50	\$562.24	\$548.45	\$501.12	\$501.81
50	\$628.69	\$599.11	\$584.29	\$569.96	\$520.77	\$521.49
51	\$653.29	\$622.56	\$607.15	\$592.26	\$541.15	\$541.90
52	\$678.78	\$646.84	\$630.83	\$615.36	\$562.26	\$563.04
53	\$705.14	\$671.96	\$655.33	\$639.26	\$584.09	\$584.90
54	\$732.81	\$698.33	\$681.06	\$664.35	\$607.02	\$607.86
55	\$761.37	\$725.55	\$707.60	\$690.24	\$630.67	\$631.55
56	\$791.25	\$754.02	\$735.36	\$717.33	\$655.42	\$656.33
57	\$822.00	\$783.32	\$763.94	\$745.21	\$680.90	\$681.84
58	\$854.07	\$813.89	\$793.75	\$774.28	\$707.46	\$708.44
59	\$887.46	\$845.70	\$824.78	\$804.55	\$735.12	\$736.14
60	\$922.17	\$878.78	\$857.04	\$836.02	\$763.87	\$764.93
61	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81
62	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81
63	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81
64+	\$958.19	\$913.11	\$890.52	\$868.68	\$793.71	\$794.81

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective July 1, 2014
District of Columbia Small Group Exchange
Appendix III-A

	1	2	3	4	5	6	7	9	10	11	12	14	15	16	17	18	19	20
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	P DC Platinum 4000/Dental/Pol/Dent	P DC Platinum 4200/Dental/Pol/Dent	KP DC Gold 4200/Dental/Pol/Dental	DC Gold 4800/Dental/Pol/Dent	P DC Gold 4800/Dental/Pol/Dent	P DC Gold 4200/Dental/Pol/Dent	KP DC Gold 4200/Dental/Pol/Dental	P DC Silver 4200/Dental/Pol/Dent	P DC Silver 4800/Dental/Pol/Dent	DC Silver 4200/Dental/Pol/Dent	KP DC Silver 4200/Dental/Pol/Dental	P DC Bronze 4200/Dental/Pol/Dent	P DC Bronze 4200/Dental/Pol/Dent	P DC Bronze 4800/Dental/Pol/Dent	P DC Bronze 4800/Dental/Pol/Dent	P DC Bronze 4200/Dental/Pol/Dental	KP DC Silver 4200/Dental/Pol/Dental	KP DC Gold 4800/Dental/Pol/Dental
20 and Under	\$276.01	\$265.02	\$256.51	\$250.22	\$228.63	\$226.95	\$229.41	\$206.72	\$194.13	\$191.78	\$199.37	\$156.73	\$163.49	\$158.69	\$174.69	\$148.19	\$221.69	\$264.94
21	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
22	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
23	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
24	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
25	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
26	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
27	\$306.82	\$292.38	\$285.15	\$278.15	\$254.15	\$254.50	\$255.01	\$229.80	\$215.80	\$214.30	\$221.62	\$174.22	\$181.74	\$176.40	\$164.73	\$194.19	\$246.44	\$294.52
28	\$313.99	\$299.22	\$291.81	\$284.66	\$260.09	\$260.45	\$260.98	\$235.17	\$220.85	\$219.31	\$226.80	\$178.29	\$185.99	\$180.53	\$168.38	\$252.20	\$301.40	\$346.78
29	\$320.74	\$305.65	\$298.09	\$290.78	\$265.68	\$266.05	\$266.59	\$240.23	\$225.60	\$224.02	\$231.68	\$182.13	\$189.99	\$184.41	\$172.21	\$203.00	\$257.62	\$307.89
30	\$328.76	\$313.29	\$305.54	\$298.05	\$272.33	\$272.70	\$273.25	\$246.24	\$231.24	\$229.62	\$237.47	\$186.68	\$194.74	\$189.02	\$176.52	\$208.08	\$264.06	\$315.58
31	\$337.20	\$321.34	\$313.39	\$305.70	\$279.32	\$279.71	\$280.27	\$252.56	\$237.18	\$235.52	\$243.57	\$191.47	\$199.74	\$193.87	\$181.05	\$213.42	\$270.84	\$323.69
32	\$344.80	\$328.58	\$320.45	\$312.59	\$285.61	\$286.01	\$286.58	\$258.25	\$242.52	\$240.83	\$249.05	\$195.79	\$204.24	\$198.24	\$185.13	\$218.23	\$276.95	\$330.98
33	\$352.82	\$336.22	\$327.90	\$319.86	\$292.25	\$292.66	\$293.25	\$264.25	\$248.16	\$246.43	\$254.85	\$208.99	\$200.34	\$204.43	\$202.85	\$223.31	\$285.39	\$338.68
34	\$361.26	\$344.26	\$335.74	\$327.51	\$299.24	\$299.66	\$300.26	\$270.58	\$254.10	\$252.32	\$260.94	\$205.13	\$213.99	\$207.70	\$203.96	\$228.65	\$290.17	\$346.78
35	\$369.70	\$352.30	\$343.59	\$335.16	\$306.24	\$306.66	\$307.28	\$276.90	\$260.03	\$258.22	\$267.04	\$209.93	\$218.99	\$212.56	\$208.49	\$233.99	\$296.95	\$354.88
36	\$378.14	\$360.35	\$351.43	\$342.81	\$313.23	\$313.66	\$314.30	\$283.22	\$265.97	\$264.11	\$273.14	\$214.72	\$223.99	\$217.41	\$203.03	\$239.33	\$303.73	\$362.98
37	\$386.58	\$368.39	\$359.28	\$350.46	\$320.22	\$320.66	\$321.31	\$289.54	\$271.91	\$270.01	\$279.23	\$219.51	\$228.99	\$222.26	\$207.56	\$244.67	\$310.50	\$371.08
38	\$391.22	\$373.81	\$364.39	\$354.67	\$324.07	\$324.52	\$325.17	\$293.02	\$275.17	\$273.25	\$282.59	\$222.15	\$231.74	\$224.93	\$210.05	\$247.61	\$314.23	\$375.54
39	\$395.86	\$377.24	\$367.90	\$358.88	\$327.91	\$328.37	\$329.03	\$296.49	\$278.44	\$276.49	\$286.94	\$224.78	\$234.49	\$227.60	\$212.54	\$259.55	\$317.96	\$380.00
40	\$411.48	\$392.12	\$382.42	\$373.04	\$340.85	\$341.32	\$342.01	\$308.19	\$289.42	\$287.40	\$297.22	\$233.65	\$243.74	\$236.58	\$220.93	\$260.43	\$330.50	\$394.99
41	\$427.52	\$407.40	\$397.32	\$387.58	\$354.13	\$354.62	\$355.34	\$320.20	\$300.70	\$298.60	\$308.80	\$242.76	\$253.24	\$245.80	\$229.54	\$270.58	\$343.39	\$410.38
42	\$444.40	\$423.49	\$413.01	\$402.88	\$368.11	\$368.62	\$369.37	\$332.85	\$312.57	\$310.39	\$321.00	\$252.34	\$263.24	\$255.50	\$238.60	\$281.27	\$356.94	\$426.59
43	\$461.70	\$439.98	\$429.09	\$418.57	\$382.45	\$382.98	\$383.75	\$345.81	\$324.75	\$322.48	\$333.50	\$262.17	\$273.49	\$265.45	\$250.22	\$292.72	\$370.84	\$443.19
44	\$479.85	\$457.27	\$446.96	\$435.02	\$397.48	\$398.03	\$398.83	\$359.40	\$337.51	\$335.15	\$346.60	\$272.47	\$284.24	\$275.89	\$257.64	\$303.71	\$385.42	\$460.61
45	\$498.42	\$474.97	\$463.21	\$451.85	\$412.86	\$413.43	\$414.27	\$373.31	\$350.57	\$348.12	\$360.02	\$283.02	\$295.24	\$286.56	\$267.61	\$315.46	\$400.33	\$478.44
46	\$517.83	\$493.47	\$481.26	\$469.45	\$428.94	\$429.54	\$430.40	\$387.85	\$364.23	\$361.68	\$374.04	\$294.04	\$306.74	\$297.72	\$278.03	\$327.75	\$415.93	\$497.08
47	\$538.09	\$512.77	\$500.08	\$487.82	\$445.72	\$446.34	\$447.24	\$403.02	\$378.47	\$375.83	\$388.67	\$305.54	\$318.74	\$308.90	\$288.90	\$342.20	\$432.20	\$516.52
48	\$559.19	\$532.88	\$519.49	\$506.95	\$463.20	\$463.84	\$464.78	\$418.82	\$393.32	\$390.57	\$403.91	\$317.53	\$331.24	\$321.50	\$300.23	\$353.92	\$449.15	\$536.78
49	\$581.14	\$553.79	\$540.09	\$526.84	\$481.38	\$482.05	\$483.02	\$435.26	\$408.75	\$405.90	\$419.76	\$329.99	\$344.24	\$334.12	\$316.81	\$367.81	\$466.77	\$557.84
50	\$603.93	\$575.51	\$561.27	\$547.50	\$500.26	\$500.95	\$501.96	\$452.33	\$424.78	\$421.81	\$436.23	\$342.93	\$357.74	\$342.25	\$324.25	\$382.24	\$485.08	\$579.72
51	\$627.56	\$598.03	\$583.23	\$568.93	\$519.83	\$520.55	\$521.60	\$470.03	\$441.40	\$438.32	\$453.30	\$356.35	\$371.74	\$360.81	\$336.94	\$397.19	\$504.06	\$602.40
52	\$652.04	\$621.36	\$605.98	\$591.12	\$540.11	\$540.86	\$541.95	\$488.36	\$458.62	\$455.42	\$470.98	\$370.25	\$386.24	\$374.88	\$350.08	\$412.69	\$523.72	\$625.90
53	\$677.36	\$645.49	\$629.52	\$614.08	\$561.08	\$561.86	\$563.00	\$507.23	\$476.43	\$473.10	\$489.27	\$384.63	\$401.23	\$389.44	\$363.68	\$428.71	\$544.06	\$650.21
54	\$703.95	\$670.82	\$654.23	\$638.18	\$583.11	\$583.92	\$585.09	\$527.24	\$495.13	\$491.67	\$508.47	\$399.72	\$416.98	\$404.73	\$377.96	\$445.54	\$565.42	\$675.73
55	\$731.38	\$696.97	\$679.72	\$663.05	\$605.83	\$606.67	\$607.90	\$547.79	\$514.43	\$510.83	\$528.29	\$415.30	\$433.23	\$420.50	\$392.68	\$462.90	\$587.45	\$702.06
56	\$760.08	\$724.31	\$706.39	\$689.07	\$629.60	\$630.48	\$631.75	\$569.28	\$534.61	\$530.88	\$549.02	\$431.60	\$450.23	\$437.00	\$408.09	\$481.07	\$610.50	\$729.61
57	\$789.62	\$752.47	\$733.85	\$715.85	\$654.07	\$654.94	\$656.30	\$591.41	\$555.39	\$551.51	\$570.36	\$448.37	\$467.73	\$453.99	\$424.95	\$499.77	\$634.23	\$757.97
58	\$820.43	\$783.82	\$762.48	\$743.78	\$679.59	\$680.54	\$681.91	\$614.48	\$577.06	\$573.03	\$592.61	\$465.87	\$485.98	\$471.70	\$440.49	\$519.26	\$658.08	\$787.54
59	\$852.50	\$812.39	\$792.29	\$772.86	\$706.16	\$707.14	\$708.57	\$638.51	\$599.62	\$595.43	\$615.78	\$484.08	\$504.98	\$490.14	\$457.72	\$539.57	\$684.74	\$818.33
60	\$885.84	\$844.16	\$823.28	\$803.08	\$733.78	\$734.80	\$736.28	\$663.48	\$623.07	\$618.72	\$639.86	\$503.01	\$524.73	\$509.31	\$475.62	\$560.67	\$711.52	\$850.33
61	\$920.45	\$877.14	\$855.44	\$834.46	\$762.44	\$763.50	\$765.04	\$689.40	\$647.41	\$642.89	\$664.86	\$522.66	\$545.23	\$529.20	\$494.20	\$582.57	\$739.31	\$883.55
62	\$920.45	\$877.14	\$855.44	\$834.46	\$762.44	\$763.50	\$765.04	\$689.40	\$647.41	\$642.89	\$664.86	\$522.66	\$545.23	\$529.20	\$494.20	\$582.57	\$739.31	\$883.55
63	\$920.45	\$877.14	\$855.44	\$834.46	\$762.44	\$763.50	\$765.04	\$689.40	\$647.41	\$642.89	\$664.86	\$522.66	\$545.23	\$529.20	\$494.20	\$582.57	\$739.31	\$883.55
64+	\$920.45	\$877.14	\$855.44	\$834.46	\$762.44	\$763.50	\$765.04	\$689.40	\$647.41	\$642.89	\$664.86	\$522.66	\$545.23	\$529.20	\$494.20	\$582.57	\$739.31	\$883.55

Rates effective July 1, 2014
District of Columbia Small Group Exchange
Appendix III-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$289.81	\$276.17	\$269.34	\$262.73	\$240.06	\$240.39
21	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
22	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
23	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
24	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
25	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
26	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
27	\$322.16	\$307.00	\$299.40	\$292.06	\$266.86	\$267.23
28	\$329.69	\$314.18	\$306.40	\$298.89	\$273.10	\$273.47
29	\$336.78	\$320.93	\$312.99	\$305.32	\$278.97	\$279.36
30	\$345.20	\$328.96	\$320.82	\$312.95	\$285.94	\$286.34
31	\$354.06	\$337.40	\$329.06	\$320.98	\$293.28	\$293.69
32	\$362.04	\$345.00	\$336.47	\$328.22	\$299.89	\$300.31
33	\$370.46	\$353.03	\$344.29	\$335.85	\$306.87	\$307.29
34	\$379.32	\$361.47	\$352.53	\$343.88	\$314.21	\$314.64
35	\$388.18	\$369.92	\$360.77	\$351.92	\$321.55	\$321.99
36	\$397.05	\$378.36	\$369.00	\$359.95	\$328.89	\$329.35
37	\$405.91	\$386.81	\$377.24	\$367.99	\$336.23	\$336.70
38	\$410.78	\$391.46	\$381.77	\$372.41	\$340.27	\$340.74
39	\$415.66	\$396.10	\$386.30	\$376.83	\$344.31	\$344.78
40	\$432.05	\$411.72	\$401.54	\$391.69	\$357.89	\$358.38
41	\$448.89	\$427.77	\$417.19	\$406.96	\$371.84	\$372.35
42	\$466.62	\$444.66	\$433.66	\$423.02	\$386.52	\$387.06
43	\$484.79	\$461.98	\$450.55	\$439.50	\$401.57	\$402.13
44	\$503.84	\$480.13	\$468.25	\$456.77	\$417.35	\$417.93
45	\$523.34	\$498.71	\$486.38	\$474.45	\$433.50	\$434.10
46	\$543.72	\$518.14	\$505.32	\$492.93	\$450.39	\$451.01
47	\$564.99	\$538.41	\$525.09	\$512.21	\$468.01	\$468.66
48	\$587.15	\$559.52	\$545.68	\$532.30	\$486.36	\$487.04
49	\$610.19	\$581.48	\$567.09	\$553.19	\$505.45	\$506.15
50	\$634.12	\$604.29	\$589.33	\$574.88	\$525.27	\$526.00
51	\$658.94	\$627.93	\$612.40	\$597.38	\$545.82	\$546.58
52	\$684.64	\$652.43	\$636.28	\$620.68	\$567.11	\$567.90
53	\$711.23	\$677.76	\$660.99	\$644.78	\$589.14	\$589.96
54	\$739.14	\$704.37	\$686.94	\$670.09	\$612.26	\$613.11
55	\$767.95	\$731.81	\$713.71	\$696.20	\$636.12	\$637.01
56	\$798.08	\$760.53	\$741.71	\$723.52	\$661.08	\$662.00
57	\$829.10	\$790.09	\$770.54	\$751.64	\$686.78	\$687.73
58	\$861.45	\$820.92	\$800.60	\$780.97	\$713.57	\$714.56
59	\$895.13	\$853.01	\$831.90	\$811.50	\$741.47	\$742.50
60	\$930.13	\$886.37	\$864.44	\$843.24	\$770.47	\$771.54
61	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68
62	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68
63	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68
64+	\$966.47	\$921.00	\$898.21	\$876.18	\$800.57	\$801.68

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
Rates effective October 1, 2014
District of Columbia Small Group Exchange
Appendix IV-A

	1	2	3	4	5	6	7	9	10	11	12	14	15	16	17	18	19	20
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	KP DC Platinum 2720(0.00%)Pct/Deduct	KP DC Platinum 2800(0.00%)Pct/Deduct	KP DC Gold 2500(0.00%)Pct/Deduct	KP DC Gold 2600(0.00%)Pct/Deduct	KP DC Gold 2700(0.00%)Pct/Deduct	KP DC Gold 2800(0.00%)Pct/Deduct	KP DC Gold 2900(0.00%)Pct/Deduct	KP DC Silver 2500(0.00%)Pct/Deduct	KP DC Silver 2600(0.00%)Pct/Deduct	KP DC Silver 2700(0.00%)Pct/Deduct	KP DC Silver 2800(0.00%)Pct/Deduct	KP DC Bronze 2500(0.00%)Pct/Deduct	KP DC Bronze 2600(0.00%)Pct/Deduct	KP DC Bronze 2700(0.00%)Pct/Deduct	KP DC Bronze 2800(0.00%)Pct/Deduct	KP DC Bronze 2900(0.00%)Pct/Deduct	KP DC Silver 2800(0.00%)Pct/Deduct	KP DC Gold 1800(0.00%)Pct/Deduct
20 and Under	\$278.39	\$265.29	\$258.73	\$252.38	\$238.60	\$230.92	\$231.39	\$308.51	\$195.81	\$194.44	\$201.09	\$158.08	\$164.91	\$160.06	\$149.47	\$176.20	\$223.61	\$267.23
21	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
22	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
23	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
24	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
25	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
26	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
27	\$309.47	\$294.91	\$287.61	\$280.55	\$256.34	\$256.70	\$257.22	\$231.78	\$217.67	\$216.15	\$223.53	\$175.72	\$183.31	\$177.93	\$166.16	\$195.87	\$248.57	\$297.06
28	\$316.70	\$301.80	\$294.33	\$287.12	\$262.34	\$262.70	\$263.23	\$237.20	\$222.76	\$221.20	\$228.76	\$179.83	\$182.09	\$182.09	\$170.04	\$200.45	\$254.38	\$304.01
29	\$323.51	\$308.29	\$300.66	\$293.29	\$267.98	\$268.35	\$268.89	\$242.31	\$227.55	\$225.96	\$233.68	\$183.70	\$191.63	\$186.00	\$173.70	\$204.76	\$259.85	\$310.55
30	\$331.60	\$316.00	\$308.18	\$300.62	\$274.68	\$275.06	\$275.61	\$248.36	\$233.24	\$231.61	\$239.52	\$188.29	\$196.42	\$190.65	\$178.04	\$209.88	\$266.35	\$318.31
31	\$340.11	\$324.11	\$316.09	\$308.34	\$281.73	\$282.12	\$282.69	\$254.74	\$239.23	\$237.55	\$245.67	\$193.13	\$201.47	\$195.55	\$182.61	\$215.27	\$273.18	\$326.48
32	\$347.78	\$331.41	\$323.21	\$315.29	\$288.08	\$288.48	\$289.06	\$260.48	\$244.61	\$242.91	\$251.21	\$197.48	\$206.01	\$199.05	\$186.72	\$220.12	\$279.34	\$333.84
33	\$355.86	\$339.12	\$330.73	\$322.62	\$294.78	\$295.19	\$295.78	\$266.54	\$250.30	\$248.55	\$257.05	\$202.07	\$210.80	\$204.60	\$191.07	\$225.23	\$285.83	\$341.60
34	\$364.38	\$347.23	\$338.64	\$330.34	\$301.83	\$302.25	\$302.86	\$272.91	\$256.29	\$254.50	\$263.20	\$206.91	\$215.84	\$209.50	\$195.64	\$230.62	\$292.67	\$349.77
35	\$372.89	\$355.35	\$346.55	\$338.06	\$309.31	\$309.93	\$309.93	\$279.29	\$262.28	\$260.45	\$269.35	\$211.74	\$220.88	\$214.39	\$200.21	\$236.01	\$299.51	\$357.95
36	\$381.41	\$363.46	\$354.47	\$345.77	\$316.37	\$317.01	\$317.01	\$286.67	\$269.27	\$267.50	\$276.39	\$216.57	\$225.93	\$219.29	\$204.78	\$241.40	\$306.35	\$366.12
37	\$389.92	\$371.57	\$362.38	\$353.49	\$323.99	\$324.43	\$324.49	\$292.04	\$274.26	\$272.34	\$281.65	\$221.41	\$230.97	\$224.18	\$209.35	\$246.79	\$313.19	\$374.29
38	\$394.60	\$376.03	\$366.73	\$357.74	\$326.86	\$327.32	\$327.98	\$295.55	\$277.55	\$275.61	\$285.03	\$224.07	\$233.74	\$226.87	\$209.75	\$249.75	\$316.95	\$378.78
39	\$399.28	\$380.50	\$371.08	\$361.98	\$330.74	\$331.20	\$331.87	\$299.06	\$280.84	\$278.88	\$288.41	\$226.73	\$236.52	\$229.57	\$214.38	\$252.71	\$320.71	\$383.28
40	\$415.03	\$395.51	\$385.72	\$376.26	\$344.27	\$344.96	\$344.96	\$310.85	\$291.92	\$289.88	\$299.79	\$235.67	\$245.85	\$238.62	\$222.84	\$262.68	\$333.36	\$398.40
41	\$431.21	\$410.92	\$400.75	\$390.92	\$357.19	\$358.41	\$358.41	\$322.97	\$303.30	\$301.18	\$311.47	\$244.85	\$254.43	\$247.92	\$231.52	\$272.92	\$346.35	\$413.93
42	\$448.24	\$427.15	\$416.58	\$406.36	\$371.29	\$371.81	\$372.56	\$335.72	\$315.27	\$313.07	\$323.77	\$254.52	\$265.51	\$257.71	\$240.66	\$283.70	\$360.03	\$430.27
43	\$465.69	\$443.78	\$432.80	\$422.18	\$385.75	\$386.28	\$387.06	\$336.78	\$327.55	\$325.26	\$336.38	\$264.43	\$275.85	\$267.74	\$250.03	\$294.74	\$374.05	\$447.02
44	\$483.99	\$461.22	\$449.81	\$438.78	\$400.91	\$401.47	\$402.28	\$362.50	\$340.42	\$338.05	\$349.60	\$274.83	\$286.69	\$278.27	\$259.86	\$306.33	\$388.75	\$464.59
45	\$502.72	\$479.07	\$467.22	\$455.76	\$417.00	\$417.65	\$418.25	\$375.63	\$353.60	\$351.13	\$363.13	\$285.46	\$297.79	\$289.04	\$269.92	\$318.18	\$403.79	\$482.57
46	\$522.30	\$497.73	\$485.41	\$473.51	\$432.65	\$433.25	\$434.12	\$391.20	\$367.37	\$364.80	\$380.29	\$296.58	\$308.43	\$300.29	\$280.43	\$330.58	\$419.52	\$501.37
47	\$542.74	\$512.20	\$500.40	\$492.03	\$449.57	\$450.19	\$451.10	\$406.50	\$381.74	\$379.08	\$392.03	\$308.18	\$321.49	\$312.04	\$291.40	\$343.51	\$435.93	\$520.98
48	\$564.02	\$537.48	\$524.18	\$511.33	\$467.20	\$467.85	\$468.79	\$422.44	\$396.71	\$393.94	\$407.40	\$320.27	\$334.10	\$324.28	\$302.83	\$356.98	\$453.03	\$541.41
49	\$586.16	\$558.58	\$544.76	\$531.39	\$485.54	\$486.21	\$487.19	\$439.02	\$412.28	\$409.40	\$423.39	\$332.84	\$347.21	\$337.01	\$314.71	\$370.99	\$470.81	\$562.66
50	\$609.14	\$580.48	\$566.12	\$552.23	\$504.58	\$505.28	\$506.30	\$456.24	\$429.45	\$426.46	\$449.99	\$345.80	\$360.63	\$350.22	\$327.05	\$385.54	\$480.27	\$584.72
51	\$632.98	\$603.20	\$588.27	\$573.84	\$524.32	\$525.05	\$526.11	\$474.09	\$445.22	\$442.11	\$467.21	\$359.43	\$374.95	\$363.93	\$339.85	\$400.63	\$508.42	\$607.61
52	\$657.67	\$626.72	\$611.22	\$596.23	\$544.77	\$545.53	\$546.63	\$492.58	\$462.58	\$459.35	\$487.05	\$373.45	\$389.57	\$378.12	\$353.11	\$416.25	\$528.25	\$631.31
53	\$683.21	\$651.06	\$634.95	\$619.38	\$565.93	\$567.06	\$568.15	\$511.71	\$480.55	\$477.19	\$493.49	\$387.95	\$404.70	\$392.81	\$366.82	\$432.42	\$548.76	\$655.82
54	\$710.03	\$676.62	\$659.88	\$643.69	\$588.14	\$589.96	\$591.85	\$531.80	\$499.41	\$495.92	\$512.87	\$403.18	\$420.59	\$408.22	\$381.22	\$449.39	\$570.30	\$681.57
55	\$737.70	\$702.99	\$685.99	\$668.78	\$611.91	\$613.15	\$614.87	\$552.52	\$518.87	\$515.25	\$532.85	\$418.89	\$436.98	\$424.13	\$396.08	\$466.90	\$592.52	\$708.11
56	\$766.64	\$730.57	\$712.49	\$695.02	\$635.92	\$637.20	\$638.45	\$574.20	\$539.23	\$535.46	\$553.76	\$433.32	\$454.12	\$440.77	\$411.62	\$485.22	\$615.77	\$735.91
57	\$796.44	\$758.97	\$740.19	\$722.03	\$659.72	\$660.64	\$661.97	\$596.52	\$560.19	\$556.27	\$575.28	\$452.24	\$471.77	\$457.91	\$427.62	\$504.08	\$639.71	\$764.52
58	\$827.51	\$788.58	\$769.07	\$750.20	\$685.46	\$686.41	\$687.80	\$619.79	\$582.05	\$577.98	\$597.73	\$469.89	\$490.18	\$475.77	\$444.30	\$523.75	\$664.67	\$794.34
59	\$859.86	\$819.41	\$799.13	\$779.53	\$712.26	\$713.49	\$714.99	\$644.02	\$603.57	\$600.80	\$621.10	\$488.26	\$509.34	\$494.37	\$461.67	\$544.23	\$699.80	\$825.40
60	\$893.49	\$853.45	\$830.39	\$810.02	\$741.14	\$742.64	\$744.21	\$669.21	\$628.45	\$624.06	\$645.39	\$507.35	\$529.26	\$513.71	\$479.72	\$565.51	\$717.66	\$857.68
61	\$928.40	\$884.72	\$862.83	\$841.66	\$769.03	\$770.10	\$771.65	\$695.35	\$653.00	\$648.44	\$670.60	\$527.17	\$549.94	\$533.78	\$498.47	\$587.60	\$745.70	\$891.19
62	\$928.40	\$884.72	\$862.83	\$841.66	\$769.03	\$770.10	\$771.65	\$695.35	\$653.00	\$648.44	\$670.60	\$527.17	\$549.94	\$533.78	\$498.47	\$587.60	\$745.70	\$891.19
63	\$928.40	\$884.72	\$862.83	\$841.66	\$769.03	\$770.10	\$771.65	\$695.35	\$653.00	\$648.44	\$670.60	\$527.17	\$549.94	\$533.78	\$498.47	\$587.60	\$745.70	\$891.19
64+	\$928.40	\$884.72	\$862.83	\$841.66	\$769.03	\$770.10	\$771.65	\$695.35	\$653.00	\$648.44	\$670.60	\$527.17	\$549.94	\$533.78	\$498.47	\$587.60	\$745.70	\$891.19

Rates effective October 1, 2014
District of Columbia Small Group Exchange
Appendix IV-B

	21	22	23	24	25	26
	Platinum	Platinum	Gold	Gold	Gold	Gold
Age	KP DC Platinum 0/20/Dental/Ped Dental/Sel	KP DC Platinum 500/20/Dental/Ped Dental/Sel	KP DC Gold 0/20/Dental/Ped Dental/Sel	KP DC Gold 500/20/Dental/Ped Dental/Sel	KP DC Gold 1000/30/Dental/Ped Dental/Sel	KP DC Gold 1250/0%/HSA/Dental/Ped Dental/Sel
20 and Under	\$292.31	\$278.56	\$271.67	\$265.00	\$242.13	\$242.47
21	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
22	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
23	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
24	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
25	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
26	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
27	\$324.94	\$309.65	\$301.99	\$294.58	\$269.16	\$269.53
28	\$332.54	\$316.89	\$309.05	\$301.47	\$275.45	\$275.84
29	\$339.69	\$323.71	\$315.70	\$307.95	\$281.38	\$281.77
30	\$348.18	\$331.80	\$323.59	\$315.65	\$288.41	\$288.81
31	\$357.12	\$340.32	\$331.90	\$323.76	\$295.82	\$296.23
32	\$365.17	\$347.98	\$339.37	\$331.05	\$302.48	\$302.90
33	\$373.66	\$356.08	\$347.27	\$338.75	\$309.52	\$309.95
34	\$382.60	\$364.60	\$355.57	\$346.85	\$316.92	\$317.36
35	\$391.54	\$373.11	\$363.88	\$354.96	\$324.33	\$324.78
36	\$400.48	\$381.63	\$372.19	\$363.06	\$331.73	\$332.19
37	\$409.41	\$390.15	\$380.50	\$371.17	\$339.13	\$339.61
38	\$414.33	\$394.84	\$385.07	\$375.62	\$343.21	\$343.68
39	\$419.25	\$399.52	\$389.64	\$380.08	\$347.28	\$347.76
40	\$435.79	\$415.28	\$405.01	\$395.07	\$360.98	\$361.48
41	\$452.77	\$431.47	\$420.79	\$410.47	\$375.05	\$375.57
42	\$470.65	\$448.50	\$437.41	\$426.68	\$389.86	\$390.40
43	\$488.97	\$465.97	\$454.44	\$443.29	\$405.04	\$405.60
44	\$508.19	\$484.28	\$472.30	\$460.72	\$420.96	\$421.54
45	\$527.86	\$503.02	\$490.58	\$478.54	\$437.25	\$437.85
46	\$548.42	\$522.62	\$509.68	\$497.18	\$454.28	\$454.91
47	\$569.87	\$543.06	\$529.62	\$516.63	\$472.05	\$472.70
48	\$592.22	\$564.36	\$550.39	\$536.89	\$490.56	\$491.24
49	\$615.46	\$586.50	\$571.99	\$557.96	\$509.81	\$510.52
50	\$639.60	\$609.50	\$594.42	\$579.85	\$529.81	\$530.54
51	\$664.63	\$633.36	\$617.69	\$602.54	\$550.54	\$551.30
52	\$690.55	\$658.06	\$641.78	\$626.04	\$572.01	\$572.81
53	\$717.37	\$683.62	\$666.70	\$650.35	\$594.23	\$595.05
54	\$745.53	\$710.45	\$692.87	\$675.88	\$617.55	\$618.41
55	\$774.58	\$738.14	\$719.87	\$702.22	\$641.62	\$642.51
56	\$804.97	\$767.10	\$748.12	\$729.77	\$666.79	\$667.72
57	\$836.26	\$796.91	\$777.20	\$758.13	\$692.71	\$693.67
58	\$868.89	\$828.01	\$807.52	\$787.71	\$719.74	\$720.74
59	\$902.86	\$860.38	\$839.09	\$818.51	\$747.87	\$748.91
60	\$938.17	\$894.03	\$871.91	\$850.52	\$777.12	\$778.20
61	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60
62	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60
63	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60
64+	\$974.82	\$928.95	\$905.97	\$883.75	\$807.48	\$808.60



KAISER PERMANENTE®

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
2101 East Jefferson Street Rockville, Maryland 20852

June 13, 2014

Mr. Efren Tanhehco
Supervisory Actuary
Department of Insurance and Securities
Insurance Product Division
810 First Street, N.E.
Washington, DC 20002

Re: NAIC #: 95639
HIOS Issuer ID 94506
Small Group On-Exchange Rate Filing
Filing #2

Dear Mr. Tanhehco,

Attached is the small group on-exchange rate filing for Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. (Kaiser) for a premium rate change effective January 1, 2015. Kaiser is an HMO company and offers traditional HMO copayment plans covering medical and pharmacy claims expenses. Kaiser also offers Deductible and High Deductible plans, some of which are HSA qualified.

The overall impact to the index rate is 8.4%.

Sincerely,

Brent Plemons
Senior Actuarial Analyst
Kaiser Foundation Health Plan, Inc.
Phone: 301-816-6634
Fax: 301-816-7124
Email: brent.r.plemons@kp.org

Rate Filing Justification Part II (Plain Language Summary)

Pursuant to 45 CFR 154.215, health insurance issuers are required to file Rate Filing Justifications. Part II of the Rate Filing Justification for rate increases and new submissions must contain a written description that includes a simple and brief narrative describing the data and assumptions that were used to develop the proposed rates. The Part II template below must be filled out and uploaded as an Adobe PDF or Microsoft Word file.

Name of Company_____

SERFF tracking number_____

Submission Date_____

Product Name_____

Market Type (Individual/Small Group)_____

Rate Filing Type (Rate Increase / New Filing)_____

Scope and Range of the Increase:

The _____% increase is requested because:

This filing will impact:

of D.C. policyholders_____ # of D.C. covered lives_____

The average, minimum, and maximum rate changes increases are:

- Average Rate Change: The average premium change, by percentage, across all policy holders if the filing is approved _____%
- Minimum Rate Change: The smallest premium increase (or largest decrease), by percentage, that any one policy holder would experience if the filing is approved _____%
- Maximum Rate Change: The largest premium increase, by percentage, that any one policy holder would experience if the filing is approved _____%

Individuals within the group may vary from the aggregate of the above increase components as a result

of:_____

Financial Experience of Product

The overall financial experience of the product includes:

The rate increase will affect the projected financial experience of the product by:

Components of Increase

The request is made up of the following components:

Trend Increases – _____% of the _____% total filed increase

1. Medical Utilization Changes – Defined as the increase in total plan claim costs not attributable to changes in the unit cost of underlying services, or renegotiation of provider contracts. Examples include changes in the mix of services utilized, or an increase/decrease in the frequency of service utilization.

This component is _____% of the _____% total filed increase.

2. Medical Price Changes – Defined as the increase in total plan claim costs attributable to changes in the unit cost of underlying services, or renegotiation of provider contracts.

This component is _____% of the _____% total filed increase.

Other Increases – _____% of the _____% total filed increase

1. Medical Benefit Changes Required by Law – Defined as any new mandated plan benefit changes, as mandated by either State or Federal Regulation.

This component is _____% of the _____% total filed increase.

2. Medical Benefit Changes Not Required by Law – Defined as changes in plan benefit design made by the company, which are not required by either State or Federal Regulation.

This component is _____% of the _____% total filed increase.

3. Changes to Administration Costs – Defined as increases in the costs of providing insurance coverage. Examples include claims payment expenses, distribution costs, taxes, and general business expenses such as rent, salaries, and overhead.

This component is _____% of the _____% total filed increase.

4. Changes to Profit Margin – Defined as increases to company surplus or changes as an additional margin to cover the risk of the company.

This component is _____% of the _____% total filed increase.

5. Other – Defined as:

This component is _____% of the _____% total filed increase.

Company Legal Name:
HIOS Issuer ID:
Effective Date of Rate Change(s):

Effective Date of Rate Change(s):

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
94506
1/1/2015

State: DC
Market: Small Group

Section I: General Product and Plan Information

[illegible]

Plan ID (Standard Component ID)	
---------------------------------	--

[illegible]

Average Current Rate PMPM	\$374.77	\$410.17	\$380.25	\$404.89	\$378.01	\$335.83	\$350.47	\$344.44	\$305.15	\$290.76	\$292.24	\$301.21	\$248.23	\$255.91	\$255.13	\$244.63	\$280.11	\$340.71	\$392.83	\$430.61	\$399.17	\$396.82
Projected Member Months	37,258	137	137	3,652	3,652	3,652	3,652	3,652	6	6	6	6	32	32	32	32	32	6	3,652	137	137	3,652

Plan ID (Standard Component ID)

[illegible]

Plan ID (Standard Component ID):	T
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Plan ID (Standard Contract ID)	Total	945060C0350002	945060C0350002	945060C0350002	945060C0350002	945060C0350007	945060C0350008	945060C0350009	945060C0350009	945060C0350009	945060C0350009	945060C0350012	945060C0350012	945060C0350012	945060C0350012	945060C0350012	945060C0350012	945060C0350012
Plan ID [Adjusted Index Rate]	\$599.90	\$486.63	\$424.66	\$400.89	\$415.07	\$389.95	\$373.21	\$334.50	\$374.13	\$311.94	\$322.59	\$263.60	\$264.55	\$246.73	\$248.71	\$248.88	\$446.88	\$435.82
Net Amount Monthly	\$17,250.17	\$13,750.17	\$11,916.67	\$11,362.53	\$11,362.53	\$10,652.53	\$10,652.53	\$9,362.53	\$10,652.53	\$8,362.53	\$8,362.53	\$6,862.53	\$6,862.53	\$6,862.53	\$6,862.53	\$6,862.53	\$13,750.17	\$13,750.17
Total Premium (TP)	\$14,899,434	\$61,386	\$58,307	\$1,478,638	\$1,515,836	\$1,351,057	\$1,352,920	\$1,355,699	\$2,007	\$1,885	\$1,872	\$1,930	\$8,115	\$8,466	\$8,217	\$7,673	\$9,043	\$2,152
EHB Percent of TP, [see instructions]	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%
state mandated benefits portion of TP that are other than EHB	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Other benefits portion of TP	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%
Total Allowed Claims (TAC)	\$14,269,935	\$52,449	\$53,610	\$1,367,531	\$1,362,531	\$1,366,663	\$1,370,578	\$2,357	\$2,320	\$2,288	\$2,305	\$10,708	\$10,954	\$10,824	\$10,436	\$10,883	\$55,075	\$56,291
EHB Percent of TAC, [see instructions]	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%
state mandated benefits portion of TAC that are other than EHB	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Other benefits portion of TAC	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%
Allowed Claims which are not the issuer's obligation	\$2,472,314	\$3,668	\$7194	\$236,266	\$152,507	\$295,826	\$298,442	\$300,130	\$655	\$720	\$705	\$666	\$4,341	\$4,297	\$4,343	\$3,746	\$488,801	\$558,179
Portion of above payable by HHS's funds on behalf of insured person, in dollars	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Portion of above payable by HHS on behalf of insured person, as %	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Total Incurred claims, payable with issuer funds	\$11,797,621	\$48,781	\$46,416	\$1,171,146	\$1,201,573	\$1,066,707	\$1,068,242	\$1,070,475	\$1,702	\$1,594	\$1,583	\$1,639	\$6,367	\$6,657	\$6,451	\$6,002	\$7,137	\$1,830
Net Amt of Reim	-\$136,741	-\$504	-\$504	-\$13,401	-\$13,401	-\$13,401	-\$13,401	-\$13,401	-\$24	-\$24	-\$24	-\$24	-\$119	-\$119	-\$119	-\$119	-\$504	-\$504
Net Amt of Risk Adm	\$535,350	\$1,975	\$1,975	\$52,466	\$52,466	\$52,466	\$52,466	\$52,466	\$93	\$93	\$93	\$93	\$465	\$465	\$465	\$465	\$1,975	\$1,975

SERFF Tracking #:

KPMA-129593007

State Tracking #:**Company Tracking #:****State:** District of Columbia**Filing Company:**

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO**Product Name:** 2015 DC Small Group**Project Name/Number:** /

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date	Schedule Item Status	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
06/13/2014		Supporting Document	DISB Actuarial Memorandum Dataset	06/13/2014	2015 Individual DISB Actuarial Memo Dataset.xlsx DISB Plain Language Summary.pdf (Superceded)

Rate Filing Justification Part II (Plain Language Summary)

Pursuant to 45 CFR 154.215, health insurance issuers are required to file Rate Filing Justifications. Part II of the Rate Filing Justification for rate increases and new submissions must contain a written description that includes a simple and brief narrative describing the data and assumptions that were used to develop the proposed rates. The Part II template below must be filled out and uploaded as an Adobe PDF or Microsoft Word file.

Name of Company_____

SERFF tracking number_____

Submission Date_____

Product Name_____

Market Type (Individual/Small Group)_____

Rate Filing Type (Rate Increase / New Filing)_____

Scope and Range of the Increase:

The _____% increase is requested because:

This filing will impact:

of D.C. policyholders_____ # of D.C. covered lives_____

The average, minimum, and maximum rate changes increases are:

- Average Rate Change: The average premium change, by percentage, across all policy holders if the filing is approved _____%
- Minimum Rate Change: The smallest premium increase (or largest decrease), by percentage, that any one policy holder would experience if the filing is approved _____%
- Maximum Rate Change: The largest premium increase, by percentage, that any one policy holder would experience if the filing is approved _____%

Individuals within the group may vary from the aggregate of the above increase components as a result

of:_____

Financial Experience of Product

The overall financial experience of the product includes:

The rate increase will affect the projected financial experience of the product by:

Components of Increase

The request is made up of the following components:

Trend Increases – _____% of the _____% total filed increase

1. Medical Utilization Changes – Defined as the increase in total plan claim costs not attributable to changes in the unit cost of underlying services, or renegotiation of provider contracts. Examples include changes in the mix of services utilized, or an increase/decrease in the frequency of service utilization.

This component is _____% of the _____% total filed increase.

2. Medical Price Changes – Defined as the increase in total plan claim costs attributable to changes in the unit cost of underlying services, or renegotiation of provider contracts.

This component is _____% of the _____% total filed increase.

Other Increases – _____% of the _____% total filed increase

1. Medical Benefit Changes Required by Law – Defined as any new mandated plan benefit changes, as mandated by either State or Federal Regulation.

This component is _____% of the _____% total filed increase.

2. Medical Benefit Changes Not Required by Law – Defined as changes in plan benefit design made by the company, which are not required by either State or Federal Regulation.

This component is _____% of the _____% total filed increase.

3. Changes to Administration Costs – Defined as increases in the costs of providing insurance coverage. Examples include claims payment expenses, distribution costs, taxes, and general business expenses such as rent, salaries, and overhead.

This component is _____% of the _____% total filed increase.

4. Changes to Profit Margin – Defined as increases to company surplus or changes as an additional margin to cover the risk of the company.

This component is _____% of the _____% total filed increase.

5. Other – Defined as:

This component is _____% of the _____% total filed increase.